

MARYLAND BOARD OF NURSING

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ADMINISTRATIVE SESSION

CALL TO ORDER

ADMINISTRATIVE ANNOUNCEMENTS

BOARD COUNSEL LEGAL ADVICE

APPROVAL OF CONSENT AGENDA

SECTION A

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The Maryland Board of Nursing board meeting was held on Tuesday, March 21, 2023 at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 2:35 p.m., before Edward Bullock, Notary Public in and for the State of Maryland.

REPORTED BY: Edward Bullock, Notary Public

AUDIO RECORDING TRANSCRIBED BY: Edward Bullock, DCR

<div>Page 2</div> <div>1 APPEARANCES:</div> <div>2</div> <div>3 MICHAEL CONTI, Assistant Attorney General</div> <div>4 KATHERINE CUMMINGS, Assistant Attorney General</div> <div>5 Office of the Attorney General</div> <div>6 State of Maryland</div> <div>7 Department of Health & Mental Hygiene</div> <div>8 300 West Preston Street</div> <div>9 Baltimore, Maryland 21201</div> <div>10 410-767-3201</div> <div>11</div> <div>12</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>	<div>Page 4</div> <div>1 ALSO PRESENT:</div> <div>2</div> <div>3 KAREN E.B. EVANS, Executive Director</div> <div>4 RHONDA SCOTT, Deputy Director</div> <div>5 AMBER HAVENS-BERNAL, Discipline Division</div> <div>6 PATRICE BURRIS, Executive Assistant</div> <div>7 SCHENEQUA BROWN, Executive Assistant</div> <div>8 CAROLYN BAILEY, Director of Licensure</div> <div>9</div> <div>10</div> <div>11</div> <div>12</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>
<div>Page 3</div> <div>1 BOARD MEMBER APPEARANCES:</div> <div>2</div> <div>3 GARY HICKS, RN Member, Board President</div> <div>4 ANN TURNER, RN Member, Board Secretary</div> <div>5 M. DAWNE HAYWARD, RN Member</div> <div>6 EMALIE GIBBONS-BAKER, APRN Member</div> <div>7 AUDREY CASSIDY, Consumer Member</div> <div>8 SUSAN STEINBERG, Consumer Member</div> <div>9 SUSAN LYONS, APRN Member (via telephone)</div> <div>10 ROBIN HILL, RN Member, LPN Educator</div> <div>11 HEATHER WESTERFIELD, RN Member</div> <div>12 CHRISTINE LECHLITER, RN Member</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>	<div>Page 5</div> <div>1 P R O C E E D I N G S</div> <div>2 MR. HICKS: Can I have a motion to go into</div> <div>3 Administrative Session?</div> <div>4 MS. HAYWARD: So moved. Hayward.</div> <div>5 MR. HICKS: Hayward.</div> <div>6 MS. CASSIDY: Second. Cassidy.</div> <div>7 MR. HICKS: Cassidy. All in favor?</div> <div>8 ALL: Aye.</div> <div>9 MR. HICKS: Opposed?</div> <div>10 (No oppositions)</div> <div>11 MR. HICKS: Motion carries. So, we will do</div> <div>12 roll call. We will start in the room first.</div> <div>13 MS. LECHLITER: Christine Lechlitter, nurse</div> <div>14 administrator member.</div> <div>15 MS. GIBBONS-BAKER: Emalie Gibbons-Baker, RN,</div> <div>16 Board member, advanced practice.</div> <div>17 MS. TURNER: Ann Turner, RN member.</div> <div>18 MS. CASSIDY: Audrey Cassidy, consumer member.</div> <div>19 MS. HAYWARD: Dawne Hayward, RN member.</div> <div>20 MS. WESTERFIELD: Dr. Heather Westerfield, RN</div> <div>21 member, associate degree programs.</div>

<p>1 MS. STEINBERG: Susan Steinberg, consumer 2 member. 3 MS. ROBIN HILL: Dr. Robin Hill, practical 4 nursing educator member. 5 MR. HICKS: So, before we get started on the 6 agenda, we are going to talk a little bit about some 7 other issues outside of the agenda. And so, with that 8 being said, I am going to ask that all the staff and 9 security leave the room while we have this conversation. 10 (Whereupon, staff members and security officers 11 left the meeting room.) 12 MR. HICKS: So, first of all, we are going to 13 talk about Operation Nightingale. So, Karen is going to 14 kind of lead that discussion. 15 MS. HAYWARD: Is it the person or the bird? 16 MR. HICKS: So, the CNOs are calling it 17 Operation Nightmare. 18 MS. EVANS: Oh, that's wonderful. Yes, I will 19 explain that wonderful meeting. 20 So, as we all know about Operation Nightingale 21 from January 25th, and of course, this Board has known a</p>	<p>Page 6</p> <p>1 to inform them that I already contacted Secretary 2 Herrera-Scott, and that our meeting gets set for April 3 3rd. So, everything was fine and good with that, but I 4 know some other things rumbling last week. 5 So, I think that the Secretary and others don't 6 really have a full understanding of where we've been and 7 how long really this has been going on. 8 (Whereupon, the phone system signaled that a 9 participant joined the call.) 10 MR. HICKS: I just want to make sure this is 11 Susan. Who just joined? 12 MS. LYONS: Hi. This is Susan Lyons. Sorry, 13 I'm late. 14 MR. HICKS: Okay, Susan. Thank you. 15 MS. EVANS: So, at the meeting on April 3rd, 16 and Gary, I want to invite you, if you can come. You may 17 already be on the email. 18 MR. HICKS: I think I am. 19 MS. EVANS: Okay. I will invite Mike and 20 Katie, Kathleen Ellis, as well as Rhonda Edwards. Rhonda 21 Edwards oversees Mike and Katie, and then Kathleen Ellis</p> <p>Page 8</p>
<p>1 little bit longer because I've been keeping you abreast 2 of things that are going on. However, things have 3 escalated to places they really don't need to be, but 4 they have escalated. 5 So, one of the things that happened two Fridays 6 ago, is I met with the chief nursing officers. I meet 7 with them once a month as well as I meet with human 8 resources from the Maryland Hospital Association once a 9 month as well. And when I tell you I had about 45 10 minutes of torture, that would be putting it mildly. I 11 was informed that we love being FBI more than we love our 12 patients, that, you know, we're not thinking about public 13 safety. And I told them that there's just things I can't 14 say. It's not the Board's investigation. And then they 15 told me they were going to go to the government. Mind 16 you, I had sent an email to Secretary Herrera-Scott to 17 apprise her of everything that's going on, and we have a 18 meeting set up for April 3rd. 19 So, in the meantime, they went to the 20 government, and then I started receiving emails last 21 week, last Tuesday, asking the status. And then, I had</p> <p>Page 7</p>	<p>1 is the attorney for the Secretary. 2 Did I say that correctly? 3 MR. CONTI: Chief Counsel for MDH. 4 MS. EVANS: Chief Counsel for MDH, thank you. 5 So, at that meeting, I just wanted to share with you what 6 I am going to speak to them about. 7 The first is, I need them to understand where 8 all of this has started. I don't think they have a good 9 comprehension on what our role has been played in all of 10 this and what we've done thus far. Because what they are 11 hearing is that we're not doing anything. Now, if you 12 look on our website we now have a whole page of Operation 13 Nightingale, including Frequently Asked Questions. And, 14 thank you, Katie, for updating my Frequently Asked 15 Questions. I appreciate it. So, we have that. So, 16 there's a link from the homepage to Operation 17 Nightingale. Also, in that, we give our explanation, 18 NCSBN's explanation, as well as everyone that has an 19 order out. So, we can be proud to say that we go back as 20 far as 2021 with doing orders. So, all of that is on one 21 particular page.</p> <p>Page 9</p>

<p style="text-align: right;">Page 10</p> <p>1 What I want to share with them is that this all</p> <p>2 started, and I believe we spoke of this part before, from</p> <p>3 one person noticing in the Education Department that we</p> <p>4 had cardstock transcripts, that there's a lot of</p> <p>5 different things wrong with the transcripts. And then,</p> <p>6 we set forth to put forward substantial equivalency on</p> <p>7 December 1st of 2018, where for any out-of-state schools</p> <p>8 would have to have approval from this Board before we</p> <p>9 will accept any of their students to be licensed here in</p> <p>10 Maryland, which includes initials, of course, new</p> <p>11 graduates, as well as those who endorse into Maryland.</p> <p>12 So, all of that has been said. And I tell you, I took a</p> <p>13 lot of grief from my sister states about this when it</p> <p>14 originally happened. Now they are like, "Karen, can you</p> <p>15 please send us what you use to determine that a school is</p> <p>16 not substantially equivalent?". So, we have shared those</p> <p>17 particular items.</p> <p>18 In the interim, we have been working closely</p> <p>19 with the FBI, and we are actually — I guess, would it be</p> <p>20 fair to say the "golden child for the FBI"?</p> <p>21 MS. SCOTT: The gold standard for conducting</p>	<p style="text-align: right;">Page 12</p> <p>1 MS. EVANS: Correct. So, the FBI has been</p> <p>2 sending other states to us, and we have been having</p> <p>3 meetings with them on and off before this actually —</p> <p>4 when this hit National Council of State Boards of Nursing</p> <p>5 because the FBI reached out to them. And so, for almost</p> <p>6 a year we've had to keep everything quiet, but we</p> <p>7 continued as this Board to continue to do the work of</p> <p>8 getting these individuals off, and they kept on sending</p> <p>9 people to us for us to do the work. So, we have</p> <p>10 developed a few plans. Mike and Katie developed — what</p> <p>11 was it that she called it, interviews? I mean, the</p> <p>12 questionnaire. The questionnaire that we have sent out</p> <p>13 to those who are on the list. Now, we received on list</p> <p>14 about six months ago. We just received a new list within</p> <p>15 the last month and they have everyone on it from across</p> <p>16 The United States, which is, I think the new batch is</p> <p>17 2,000 or 4,000.</p> <p>18 MR. CONTI: 2,000.</p> <p>19 MS. EVANS: 2,000. The old batch was 3,000.</p> <p>20 But remember, this is from all the states.</p> <p>21 MR. HICKS: Is that a total of 5,000</p>
<p style="text-align: right;">Page 11</p> <p>1 investigations surrounding this case.</p> <p>2 MS. EVANS: Yes. So, they have — and I can</p> <p>3 tell you, the leader of all of this is Sara. When I tell</p> <p>4 you her knowledge base, her thought process, everything</p> <p>5 is — sometimes I am amazed with what she comes up with.</p> <p>6 I'm like, "Wow, that makes a lot of sense." So, really,</p> <p>7 she has a close relationship with the FBI, which is why</p> <p>8 we can do a little more possibly that somebody else. And</p> <p>9 they have a trust in this Board, and that's definitely</p> <p>10 because of the relationship that they have with Sara and</p> <p>11 for Rhonda and myself, we rarely talk to them, but when</p> <p>12 we do that has happened.</p> <p>13 So, we started that on December 1st. How many</p> <p>14 cases have we — I can't remember how many people are on</p> <p>15 our webpage, but it's more than 30.</p> <p>16 MR. CONTI: There's 47 that are unrelated to</p> <p>17 the most recent batch that got summarily suspended. So,</p> <p>18 the 47 related to National School of Nursing and Allied</p> <p>19 Health. The others, there are 19, that are now summarily</p> <p>20 suspended from this most recent batch from the Florida</p> <p>21 schools.</p>	<p style="text-align: right;">Page 13</p> <p>1 altogether?</p> <p>2 MR. CONTI: So, Napoleon's affidavit had nearly</p> <p>3 5,000 names that were identified having obtained fake</p> <p>4 transcripts. Etienne's affidavit had 587, and Sanon's</p> <p>5 affidavit had 2,016.</p> <p>6 MS. EVANS: On top of what we already have.</p> <p>7 MR. CONTI: Yeah, 7,600.</p> <p>8 MS. WESTERFIELD: Karen, can you just clarify?</p> <p>9 The chief nurses want these people working?</p> <p>10 MS. EVANS: No, they don't want them working.</p> <p>11 They are upset because I can't give them the names. And</p> <p>12 the reason why I can't —</p> <p>13 MS. WESTERFIELD: Yeah, I was like, wait a</p> <p>14 minute.</p> <p>15 MS. EVANS: No, no, no.</p> <p>16 MS. WESTERFIELD: When you said we favor the</p> <p>17 FBI and said "them", I thought you meant like because</p> <p>18 they wanted these people to be working because they're</p> <p>19 working.</p> <p>20 MS. EVANS: Oh, no, no, no.</p> <p>21 MR. HICKS: No, that's what they're meaning by</p>

<p style="text-align: right;">Page 14</p> <p>1 we favor the FBI because we're protecting -- well, we're</p> <p>2 not protecting the names, but we don't have to reveal</p> <p>3 them.</p> <p>4 MS. WESTERFIELD: I'm sorry..</p> <p>5 MS. EVANS: No, no, no, that's fine. That's</p> <p>6 why I wanted to have this conversation.</p> <p>7 MS. HAYWARD: Everybody deserves their due</p> <p>8 process.</p> <p>9 MS. EVANS: They don't see it that way.</p> <p>10 MR. HICKS: They don't understand that.</p> <p>11 MS. STEINBERG: Can't they look at their</p> <p>12 employees' transcripts themselves and see?</p> <p>13 MR. CONTI: They can.</p> <p>14 MS. STEINBERG: Okay.</p> <p>15 MR. HICKS: If they collected them.</p> <p>16 MS. STEINBERG: Maybe they don't.</p> <p>17 MR. HICKS: They don't.</p> <p>18 MS. STEINBERG: Okay.</p> <p>19 MR. HICKS: Not all do, anyhow.</p> <p>20 MS. EVANS: And in the meantime, Mike had a</p> <p>21 meeting with Life Bridge last week.</p>	<p style="text-align: right;">Page 16</p> <p>1 MS. EVANS: Right.</p> <p>2 MR. HICKS: I wish we could reach out to the</p> <p>3 FBI contact that we have and maybe they could deliver</p> <p>4 that message to whoever does the inquiry. So, if Life</p> <p>5 Bridge or UMMS or GBMC, whatever those organizations are</p> <p>6 that reach out to them, somehow, someday if there could</p> <p>7 be a statement by the FBI to say, "It is not the liberty</p> <p>8 of the Boards to give you the names." Because I think</p> <p>9 that would take a lot off of us. Because I think the</p> <p>10 CNO, their thought is, 'Look, you're holding these names.</p> <p>11 You know who these people are. We have a right to know</p> <p>12 who these people are that's working in our organization.'</p> <p>13 But I think if the FBI was able to say, 'It is not the</p> <p>14 Board's responsibility to give these names.' I'm just</p> <p>15 trying to get us out of that. So, I don't know if that's</p> <p>16 a doable thing or not.</p> <p>17 MS. EVANS: I can definitely ask the question</p> <p>18 to them.</p> <p>19 MS. STEINBERG: So, the list, that's not a</p> <p>20 public document? That wasn't a part of any trial or</p> <p>21 anything?</p>
<p style="text-align: right;">Page 15</p> <p>1 MR. CONTI: Correct, and I have another one</p> <p>2 scheduled with UMMS Thursday.</p> <p>3 MS. EVANS: Thursday, okay. So, we're doing</p> <p>4 what we're supposed to be doing. So, we have to give</p> <p>5 everyone due process. An example I can share is that we</p> <p>6 don't where in the process these schools stopped being</p> <p>7 real. Because in order to get approved by a Board, you</p> <p>8 had to be real, submit the correct information, have a</p> <p>9 few classes like they have to do for our state. And then</p> <p>10 we don't know when they went rogue on that. So, we</p> <p>11 can't say that everyone on the list has a fake degree.</p> <p>12 We can't state that. So, we have to give everyone due</p> <p>13 process. That's not what was understood. What I did</p> <p>14 provide the CNOs is that if there is someone that you</p> <p>15 would like for us to look at, please, feel free to email</p> <p>16 Sara. So, that's how we have it set up. I also gave</p> <p>17 them our Operation Nightingale website, in addition to</p> <p>18 the contact at the FBI. Because maybe the FBI will share</p> <p>19 the list with you, we cannot because it's not our -- even</p> <p>20 though we have it, it's not really --</p> <p>21 MS. CASSIDY: It's not your property.</p>	<p style="text-align: right;">Page 17</p> <p>1 MR. CONTI: Not that I know of, no.</p> <p>2 MS. STEINBERG: So, just grand jury</p> <p>3 information?</p> <p>4 MR. CONTI: I think it's -- the way it's been</p> <p>5 explained to me, that was an affidavit that they provided</p> <p>6 directly to the FBI, separate from their criminal</p> <p>7 proceeding.</p> <p>8 MS. STEINBERG: So, it's still part of the</p> <p>9 investigative file?</p> <p>10 MR. HICKS: Right. And that's what we're</p> <p>11 trying to tell them that this is still under</p> <p>12 investigation by the FBI. It's not like --</p> <p>13 MS. STEINBERG: Until the FBI says that you can</p> <p>14 disclose them.</p> <p>15 MR. CONTI: Well, we wouldn't disclose it</p> <p>16 anyway. I mean, it's part of our own internal</p> <p>17 investigations against each of these particular</p> <p>18 individuals. So, just for the purpose of not disclosing</p> <p>19 information related to an open and ongoing investigation</p> <p>20 here at the Board, which is covered under our own</p> <p>21 confidentiality statutes. Nor would we want to produce a</p>

<p style="text-align: right;">Page 18</p> <p>1 list that alleges fraud against somebody without having 2 gone through the process of proving that they engaged in 3 fraud. We don't want any defamation suits against us. 4 MS. STEINBERG: I was saying, if there was a 5 way the hospitals would get it through some other way, 6 let that be their issue. 7 MR. HICKS: Right. 8 MS. EVANS: That's why I sent them to the FBI. 9 MR. CONTI: If the FBI wants to give it up, 10 then that's up to the FBI. 11 MS. EVANS: Their biggest concern, and I 12 understand what their biggest concern is, is that we have 13 compact nurses that don't have to stop here at the Board 14 of Nursing. They can work, you know, go to the 15 particular hospitals. And again, I stated that if you 16 have anybody you're concerned with, send us a list. Send 17 a list to Sara, and we will do our end of the bargain. 18 Now, just so you know, no state is as far as we are when 19 it comes to summarily suspending, to doing all the things 20 that we've done. So, we are, you know, in the top group. 21 We've done a lot more than anybody else has done. And</p>	<p style="text-align: right;">Page 20</p> <p>1 want them to have a true understanding of what the Board 2 has done because I don't know if they have that. And 3 again, it's very hard for the community to understand due 4 process. They did say, 'We know you have to do due 5 process.' They also wanted us to send out letters to all 6 of the nurses telling them, including themselves, to say, 7 "If you have gone to one of these schools, surrender your 8 license." Well, we can't do that either. 9 MS. STEINBERG: Or send a letter to all of 10 their employees, "If you've gone to this school, please, 11 quit now." 12 (Laughter) 13 MR. HICKS: Well, they don't have to quit. We 14 don't know if they have to quit. 15 MR. CONTI: But they also wanted us to advise 16 them about what to do with the employees, and that's not 17 part of the Board's jurisdiction. I mean, we will take 18 action against their licensure once sufficient evidence 19 in order to move forward with a proceeding has been 20 collected. We can go forward and we'll do that, and have 21 been doing that. But we cannot advise employers on what</p>
<p style="text-align: right;">Page 19</p> <p>1 again, you see they keep on asking us for more and more 2 things so that they can share it with the other states. 3 Or, another state will call me and ask me if I could 4 share something with them. 5 So, this case has so many layers that it's very 6 difficult just to describe the one. Mind you, we spoke 7 with Webster, who was from the previous administration, 8 when all this prior to knew was coming out sometime soon. 9 But we just wanted to make sure that Secretary aware of 10 what was going on and that we're going to be as 11 transparent as we possibly can be. But even before that, 12 we have been answering media questions for at least a 13 year. Anything we did, Washington, D.C., WBAL, a few 14 others that we have answered questions because they 15 wanted to know what this Board is doing, and do we have – 16 - and of course, we can't divulge anything, but we 17 answered it as politically correct and legally as we 18 could. And they really haven't pushed back on any of our 19 responses, so we are very grateful about that. 20 So, this is what we will be speaking to those 21 individuals about. I want to go from start to finish. I</p>	<p style="text-align: right;">Page 21</p> <p>1 to do with their own employees. 2 MS. EVANS: Right, because there's employment 3 laws that we're not — you know, have expertise in. 4 MR. HICKS: One of the questions I have, and I 5 don't know if this is doable. Is there the opportunity 6 to create a timeline of things that we have done? I 7 don't know that we want to necessarily disclose, or maybe 8 we do want to disclose. We should disclose that we 9 contacted the FBI in March of 1999, and then January, 10 2020 we started with communications with the FBI. You 11 know, because I think it's fine for you to kind of talk 12 that out, but they're only going to hear pieces of what 13 they want to hear versus, okay, let me just look at this 14 whole timeline and really start to see what the Board has 15 been doing. You know, when we started communicating with 16 the CNOs, when we started this. And it doesn't have to 17 be exact dates, it could just be March of 2020, or 18 whatever those things are. But I think if we have a 19 running list of timeline of the things that we truly have 20 been doing and continue to do then I think that may help 21 to have them understand that we're just not sitting back.</p>

<p style="text-align: right;">Page 22</p> <p>1 And it could be things that are happening, whatever we 2 can legally give, things that we have been doing behind 3 the scenes that the CNOs may not know, and the CEOs may 4 not know, because all of they're going to hear are the 5 little things that they are specifically looking for. 6 MS. WESTERFIELD: As long as we don't hear them 7 say, "You've known this for four years, and we're just 8 hearing about it now." I mean, I can hear that, too. 9 "Four years"?</p> <p>10 MR. HICKS: But, in the meantime, but with the 11 disclaimer on there that we are providing information 12 along this timeline as legally, based off of our 13 regulations that we are permitted to do, and based off of 14 what direction we have been provided by the FBI as to 15 what we can provide. 16 MS. WESTERFIELD: I get it, but it sounds like 17 they hear one thing, and if we say, "For four years we've 18 had this information," and they're just finding out about 19 x, y, and z now, they're already at us for every little 20 thing. 21 MS. HAYWARD: Karen already informed the</p>	<p style="text-align: right;">Page 24</p> <p>1 just getting -- we basically started this to kind of have 2 this working relationship that, you know, they would know 3 about it, they would support, they would do all of those 4 things, and it's just starting to get an attack onto 5 Karen and almost the Board of itself. 6 So, I've said that we will no longer discuss 7 this unless the FBI says, "Hey, Karen, you can disclose 8 x, y, and z. And then, in a meeting we will say, you 9 know, that the FBI has given us permission to let you 10 know x, y, and z, and that's it. We're not going to go 11 into this detailed Operation Nightingale; we're not going 12 to have special meetings about Operation Nightingale. If 13 those hospitals or organizations want to have those 14 meetings, that's on them. They can have those meetings. 15 They can go to the Board's website. That's why we have 16 created the page with all the information on there for 17 them to go to that information and use that to drive 18 their own meetings and whatever they're going to do. But 19 the days of having Karen or Mike or me kind of having 20 this one hour meeting about Operation Nightingale has got 21 to stop because it's not being productive. And</p>
<p style="text-align: right;">Page 23</p> <p>1 previous administration. 2 MS. EVANS: I did let the previous 3 administration know. But what I'm saying to you, it's 4 not like this has truly been a big secret because I have 5 spoken to them. Not saying that it was there, but -- 6 MS. WESTERFIELD: I know. I'm just saying, do 7 we need to defend what we've done to them? 8 MS. EVANS: This really is just to the 9 Secretary. The conversation I'm having is not for the 10 CNOs. No, this is just for the Secretary. I've already 11 asked Sara to pull the timeline for me and then I can put 12 my own timeline of when I communicated with -- 13 MS. WESTERFIELD: I thought it was for the 14 CNOs. 15 MS. EVANS: No, no, no. 16 MR. HICKS: I will tell you -- I don't know if 17 I really call it a directive, but I let Karen know, and I 18 believe Mike is aware, that I have asked Karen not to 19 discuss any of the Operation Nightingale information with 20 the CEOs, or anyone else for that matter, unless it is 21 something new and we have to disclose. Because this is</p>	<p style="text-align: right;">Page 25</p> <p>1 unfortunately, the CNOs drove that, for the last thing 2 that Karen's going to talk to you about. I think you're 3 going go into that. You kind of talked about in the 4 beginning, or you didn't, the CNO meeting? 5 MS. EVANS: Yes, I just said a little bit about 6 the CNO meeting. 7 MR. HICKS: Actually, they were words that 8 Karen really talked about. 9 MS. EVANS: Christine was there. She could 10 tell you. 11 MS. LECHLITER: I was on that meeting. I 12 walked away with a really bad feeling and feeling very 13 -- she was very much under attack by the CNOs. It went 14 on for quite a while. Karen did her best. 15 MR. HICKS: There are some drivers of that, and 16 so I want Karen, Mike, and the Board kind of out of that 17 opportunity to be attacked. This is not something we 18 should be attacked about. We are doing what we need to 19 do. We are following the laws. We were trying to be 20 helpful to them by giving them some kind of information 21 to help drive the way that they want to handle this, and</p>

<p style="text-align: right;">Page 26</p> <p>1 it has turned into a very nasty thing. So, we will no 2 longer be having Operation Nightingale meetings with any 3 group. They will be referred to the website for 4 information. 5 MS. LECHLITER: Just for my own knowledge, I 6 was on that call but I did not speak up because I did not 7 want to put the Board in any position that I was speaking 8 for the Board, assuming that was the right thing. 9 Although, I did feel very bad for Karen in the situation. 10 I was not on that call as a Board member. 11 MR. HICKS: That was probably the best thing. 12 Because even if you were on that call as a CNO there's 13 always the thought that you're representing the Board. 14 Someone would take that as you representing the Board and 15 could very well take whatever statement you said and say, 16 "The Board of Nursing said, 'x, y, and z,'" when that 17 wasn't really at all the intent. And I'm just nervous 18 right now about the CNOs and even MHA even kind of makes 19 me a little nervous about taking any and every 20 opportunity that they can to find the one statement or 21 statements that they could use either against us or use</p>	<p style="text-align: right;">Page 28</p> <p>1 one again. What's the third one? 2 MS. SCOTT: I can't remember right now. 3 MS. EVANS: That's okay. We said it was not an 4 approved school last month, so it's okay. So, we have 5 the three schools, and with them, for individuals that 6 are here in Maryland, we have approximately 219 which are 7 privileged to practice, which will be compact individuals 8 that don't live in this state, but possibly working in 9 this state. So, remember, normally what happens is that 10 another state will give the discipline and then if 11 they're here we do a reciprocal discipline. 12 MS. SCOTT: Right. 13 MS. EVANS: But in this case, because another 14 state has not, we still have these 219, currently -- I 15 know it's more, -- but, 219 people that have gone to one 16 of the three schools. 17 So, I would like to -- we need to, of course, 18 present it, but that's a lot of wear and tear on our 19 investigators. It's a lot of wear and tear on counsel 20 and on the prosecutors with that large amount. Because 21 what that would involve is, of course, coming here and</p>
<p style="text-align: right;">Page 27</p> <p>1 to their benefits, you know, that the Board said or the 2 president said or the legal counsel said, whatever. So, 3 I'd rather us just come out of it. Go to our website. 4 If there's a new release or new information, either legal 5 counsel or the president or the executive director will 6 notify you of that, and that's where it stops. We won't 7 take any questions. Or, we will listen to their 8 questions and take it under advisement, and if it's a 9 question that we have not answered on the Frequently 10 Asked Questions, we could do the investigation and update 11 the Frequently Asked Questions. But we are not going to 12 entertain questions about this in depth, period. 13 MS. EVANS: So, and then, I will definitely 14 inform Jane to let them know that everything is going to 15 be updated on our website. I think when I spoke to her I 16 said that, but I don't think I put it in writing. So, we 17 have the website. 18 So, with that -- with all of that -- so, that's 19 that particular piece, now we have to talk about the 20 investigation piece. So, as you know, we have all of 21 these schools; we have Siena, Sacred Heart -- I'm missing</p>	<p style="text-align: right;">Page 29</p> <p>1 then charges would have to be met and then trying to 2 schedule all of the show cause hearings or the summary 3 suspensions. I'm not legal, so I don't know the proper 4 way, but that would be a lot for all of the individuals 5 to have to do at one time. And that would require more 6 Board meetings; we'd have to have a quorum; we would need 7 to really think about how we were going to this. Are 8 some of the Board meetings going to be virtual or et 9 cetera? It's a lot that will put wear and tear. 10 What I'm most concerned with, and what both 11 Rhonda and I had to deal with today, is the whole team 12 walking out of the Board because of the load that they 13 have on them and the pressure that is being put on them. 14 And so, I think we did well. I think we still have a lot 15 more work, meaning Rhonda and I, to keep them here, and 16 we're doing everything that we can. 17 But I just wanted to have a sort of plan in 18 place of how you guys would like to proceed forward. We 19 can bring a certain amount each time for the privilege to 20 practice, so not to overload the investigation piece. 21 Because remember, this has been for the last week or two</p>

<p style="text-align: right;">Page 30</p> <p>1 this is all they've been doing, which means that we're 2 not getting other priority ones completed, and we're not 3 doing other things that we need to do. So, it's trying 4 to balance with the five and a half people that we have. 5 And I'm also concerned that they're starting to get ill, 6 and I'm just — you know, I'm trying to keep everybody 7 afloat. 8 So, something to think about. It's not a 9 decision we have to make today, but how do we want to 10 approach it? Do we want to do each school? And 11 depending on how many are in that particular school, do 12 we need to cut that in half and present that this month, 13 and have them do their piece for a couple of months and 14 then present the rest of it? Because they are privileged 15 to practice, plus we have to worry about the individuals 16 who we know are licensed in this state because we want to 17 get them off as well. So, it's just trying to learn how 18 to juggle. 19 MS. SCOTT: That's been their priority. 20 MS. EVANS: That's been our priority for that. 21 MR. CONTI: The folks that are licensed here</p>	<p style="text-align: right;">Page 32</p> <p>1 And that may be a way that we don't have to do each 2 school. I mean, we're just trying to figure out what's 3 best, and trying to figure out what's best for the load 4 for the team as well. 5 So, when we get the name then I think that if 6 they're going to any of those schools then I think that 7 way we can concentrate on the individuals who are here in 8 the state that is licensed by us. And then, for those 9 who are on the privilege to practice, if they don't go 10 back home then we can do that as well. So, I just wanted 11 to viewpoints. 12 MR. HICKS: Yeah, I'm going to kind of push 13 back a little bit and say that I think we do need to make 14 that decision today on how we want to handle this because 15 I don't want to keep kicking the can down the road. I 16 just worry about what's around the corner that we don't 17 know, other schools pop up, or whatever those things are. 18 So, the longer we keep pushing down the road, the more 19 potential we have to — 20 MR. CONTI: So, what would you want to do? Do 21 you want to sort of explain that right now? It's just</p>
<p style="text-align: right;">Page 31</p> <p>1 should always be the top priority. Keep in mind the 2 framework and structure we're working in. Summary 3 suspensions is taking action because there's an emergent 4 need to protect the public. So, we have to keep that in 5 mind when we stratify how to go after these folks. The 6 people that are licensed here have to be the top 7 priority. 8 MS. SCOTT: Right. 9 MS. EVANS: Right. 10 MR. CONTI: And then it's, how do you deal with 11 the privilege? 12 MR. HICKS: Right. 13 MR. CONTI: Do we have to do legwork to try and 14 find out who's actually here working on a privilege, or 15 do we just take all the privilege in the same? 16 MS. EVANS: Well, we can't, and this is 17 something else the CNOs — anyone who comes as a compact, 18 they don't have to stop at this Board at all. But since 19 the hospitals and long-term care hired them then they 20 should, as was said, send their names to Sara, and we 21 will do our end of the bargain knowing that they're here.</p>	<p style="text-align: right;">Page 33</p> <p>1 the two affidavits, but there's the other affidavit as 2 well. 3 MS. EVANS: Right. So, what I meant, I meant 4 since we're going to be together tomorrow, you all could 5 have the chance to think. That's what I was trying to 6 say. 7 MR. HICKS: Oh, okay. Fair enough. 8 MS. EVANS: Because I'm giving you a lot at one 9 time, and I just wanted you to process that. 10 MR. HICKS: Right. 11 MS. EVANS: So, we have two affidavits. 12 There's another affidavit and, trust me, there's more 13 affidavits coming. So, that's why we've concentrated on 14 the individuals that we license first so that we can get 15 them off because it's more — we have better information 16 for those who are in-state then we do and can get in 17 contact and have them come in and interview and all the 18 other things that Sara's team does then we have for 19 someone in the contact because they can just go back to 20 their home state. 21 MR. HICKS: I was just going to say that makes</p>

<p style="text-align: right;">Page 34</p> <p>1 sense to pawn it off until tomorrow, but knowing that the</p> <p>2 Board needs to know that we need to come up with a</p> <p>3 decision tomorrow.</p> <p>4 MS. HAYWARD: We are very busy tomorrow.</p> <p>5 MS WESTERFIELD: We are very busy tomorrow.</p> <p>6 MR. CONTI: There's three affidavits so far.</p> <p>7 And I think Karen's absolutely right, there will be more</p> <p>8 affidavits coming.</p> <p>9 MS. EVANS: There's more.</p> <p>10 MR. CONTI: And what these affidavits are doing</p> <p>11 is, these individuals who owned and operated these</p> <p>12 facilities and ran the fraud scheme, they're identifying</p> <p>13 two lists; one list of folks who legitimately went</p> <p>14 through the program and graduated; and another list of</p> <p>15 folks who did not, who received diplomas but did not</p> <p>16 complete the program.</p> <p>17 So, out of all these lists there is a total of</p> <p>18 about 7,600 out of these three affidavits. We already</p> <p>19 tackled the Napoleon affidavit, that's the one with 5,000</p> <p>20 names. The people coming tomorrow are the folks that the</p> <p>21 investigative team identified as actually being licensed</p>	<p style="text-align: right;">Page 36</p> <p>1 MS. WESTERFIELD: So, we just stick with</p> <p>2 licensed right now?</p> <p>3 MR. HICKS: Yeah.</p> <p>4 MS. WESTERFIELD: Once we're done with that,</p> <p>5 then we go back to privileged, right?</p> <p>6 MS. EVANS: Yes.</p> <p>7 MR. CONTI: I think that's right but, I mean,</p> <p>8 based on my conversations with Sara, I think there's a</p> <p>9 very actually limited number of individuals who were</p> <p>10 actually licensed from the other two affidavits that we</p> <p>11 know. So, I think it's actually a fairly small world,</p> <p>12 which is good, in terms of the folks that are actually</p> <p>13 licensed here. So, we're kind of at the cusp of having</p> <p>14 to deal with, "What do you do with the folks that have a</p> <p>15 privilege?".</p> <p>16 MS. EVANS: So, and part of that was</p> <p>17 instituting the substance equivalency for the schools in</p> <p>18 2018, and individuals know not to come here. So, we have</p> <p>19 a reputation already from even these fake schools that</p> <p>20 you need to go to another state before you can endorse,</p> <p>21 but they don't know that in the endorsement piece that we</p>
<p style="text-align: right;">Page 35</p> <p>1 by Maryland.</p> <p>2 MS. EVANS: They're coming today because of</p> <p>3 everything that's happening tomorrow, the twenty-five</p> <p>4 people.</p> <p>5 MR. CONTI: The ones that are scheduled for the</p> <p>6 show cause hearings tomorrow, those are the licensees</p> <p>7 that are from the list of the Napoleon affidavit.</p> <p>8 MS. EVANS: Yes.</p> <p>9 MR. CONTI: The other two affidavits, that's</p> <p>10 the 219 people that I've identified as either being</p> <p>11 licensed here in Maryland or having a privilege to</p> <p>12 practice here in Maryland from those other two. We</p> <p>13 haven't yet identified exactly how many people from the</p> <p>14 Napoleon affidavit have a privilege.</p> <p>15 MS. EVANS: Right.</p> <p>16 MR. CONTI: We've taken care of the folks that</p> <p>17 are licensed here, but we don't know exactly the number.</p> <p>18 And that, you know, given that there's 5,000 names that</p> <p>19 could be a lot. It could be double the 219 that they</p> <p>20 identified from the other two affidavits with a</p> <p>21 privilege. So, there's a lot, and there will be more.</p>	<p style="text-align: right;">Page 37</p> <p>1 also look at what was your pre-licensure school. So, we</p> <p>2 don't endorse them in if their</p> <p>3 pre-licensed school was one of the schools on our "not</p> <p>4 approved" list.</p> <p>5 MS. SCOTT: Would you mind if I brought Sara in</p> <p>6 to speak to, you know, as far as handling the folks that</p> <p>7 are licensed here and what they're anticipating and how</p> <p>8 much more time?</p> <p>9 MS. EVANS: Sure. I think that would be</p> <p>10 beneficial for everyone.</p> <p>11 MR. HICKS: And then, I guess the other</p> <p>12 question that I would have is: Should this be, to work</p> <p>13 on this, should we have a subcommittee just like we have</p> <p>14 with all the other PRR and CHRC and all those that kind</p> <p>15 of look at these understanding it's a big task and it's a</p> <p>16 lot work. But I think if you could, you know, kind of</p> <p>17 look at these and make a recommendation and then bring it</p> <p>18 back to the full Board versus really trying to -- I mean,</p> <p>19 if we get 125 people, that's a lot of time out of the</p> <p>20 Board's regular scheduled day on top of everything else</p> <p>21 that we have to do. So, if we have a subcommittee who</p>

<p style="text-align: right;">Page 38</p> <p>1 can look at these and bring the recommendations back to 2 Board – 3 MR. CONTI: I mean, it seems to me like if 4 we're pursuing a summary suspension angle, which seems 5 appropriate in these cases, and the standard is, there's 6 an emergency that requires quick action, it's really more 7 about, like, do we just take on all of these privileges 8 all at once because it's important to get the dealt it, 9 or do we try to tier the privileges in terms of these are 10 the folks with a privilege that we have knowledge are 11 here in Maryland versus here are the ones with a 12 privilege but we don't know whether they are in Maryland 13 or not? 14 MS. EVANS: That's what I was saying to you. 15 That's why I think it's important for the hospitals to 16 let us know the ones that they are concerned about. 17 MS. HAYWARD: I mean, the addresses are 18 constantly changes. Just getting ahold of these people 19 to notifying them is a huge deal. 20 MR. HICKS: I hear what you're saying and I 21 totally agree that, you know, whether we say, you know,</p>	<p style="text-align: right;">Page 40</p> <p>1 between. Again, the addresses, I'm telling you. 2 MR. HICKS: I guess that maybe I'm envisioning 3 it wrong that the Board would actually have to hear each 4 and every one of these cases. 5 MR. CONTI: It would. Well, actually, 6 yesterday we brainstormed — the legal counsel 7 brainstormed ideas about opportunities to potentially 8 involve the Office of Administrative Hearings. There's a 9 provision — of course, there's the provision you're 10 familiar with in terms of delegating authority to OAH, 11 but there's actually another provision in there that 12 allows us, as a Board, to ask the Chief Administrative 13 Law Judge whether that judge would allow delegation to a 14 person who is not a member of OAH. And thought was 15 potentially to ask the Chief ALJ to appoint on of the 16 Board members to hear these cases so we wouldn't need to 17 meet with a Quorum. It could be one or two or three 18 volunteers that would sit and hear all these cases. It's 19 an interesting theory. I don't know that it's ever been 20 tried. 21 MS. EVANS: What is the cost of that?</p>
<p style="text-align: right;">Page 39</p> <p>1 to do X as a general rule, I'm just thinking that at 2 least the Board members would see the documents, review 3 those documents, and agree that we should move forward, 4 and then bring that back to the full Board for a vote. 5 Because, I mean, understanding that maybe we say, "Hey, 6 everyone on this list should get X." I don't know what 7 that is, you know, summary suspension or — 8 MS. WESTERFIELD: We have done one that has 9 gone to the LPN school that we haven't suspended. 10 MS. CASSIDY: Yep. 11 MS. WESTERFIELD: Why would it be any 12 different? 13 MS. CASSIDY: Yes, exactly. 14 MS. CUMMINGS: And was just going to add onto 15 what Gary mentioned about the process for voting, and 16 then also considering the summary suspension hearings 17 afterward that would have to occur. And then, separate 18 from that, the charges that would have to eventually 19 ultimately deal with the outcome of whatever action you 20 give the license. 21 MS. HAYWARD: There are other pieces in</p>	<p style="text-align: right;">Page 41</p> <p>1 MR. CONTI: That would only cost the time that 2 you're normally paid from what you do to come in here. 3 MS. EVANS: We have no budget, so I'm just 4 trying to keep it okay. 5 MR. CONTI: Yeah, I mean you could do it. 6 MS. STEINBERG: It's a shame you can't do a 7 class action in this type of thing. 8 MR. CONTI: I know. That would be one thing 9 potential option to try and take some of the pressure off 10 this Board to have a Quorum constantly and meet ten days 11 in a row or whatever. 12 MS. EVANS: But we also have to think about the 13 team. 14 MR. CONTI: The prosecutors and the team, 15 right. 16 MS. EVANS: Well, yeah. I have to think about 17 the team because, again, we have five and a half 18 individuals, and they're doing a lot. So, it's not just 19 the prosecutors, it's not just OAH. I have to think 20 about this team. 21 And now that Sara's here, thank you, Sara, for</p>

<p style="text-align: right;">Page 42</p> <p>1 coming in on short notice.</p> <p>2 MS. TONGUE: You're welcome.</p> <p>3 MS. EVANS: So, Rhonda explained to you what</p> <p>4 she would like for you to speak about.</p> <p>5 MS. TONGUE: Sure. So, I just wanted to be</p> <p>6 able to answer any questions that you may have. But</p> <p>7 right now what we're looking at is, the goal -- we first</p> <p>8 had Napoleon B List, right? And Napoleon B List have</p> <p>9 about 11,000 entries, but if you really take those down,</p> <p>10 we have about 4,000 to 5,000 individuals. And so, the</p> <p>11 list that we brought to you last month was, our team --</p> <p>12 the FBI made an alert in NURSUS, and it was the alerts</p> <p>13 that was based on Napoleon's list. And the NURSUS alerts</p> <p>14 basically say, "Hey, these people from Maryland are</p> <p>15 associated with Napoleon B." So, what we did is that we</p> <p>16 -- it was like 380-something people. We went through</p> <p>17 one-by-one about six or seven times and narrowed out to</p> <p>18 people that we actually licensed in the State of</p> <p>19 Maryland, or endorsed in. And that list came down to,</p> <p>20 like, 25 people, okay? So, now from out of the 300-plus</p> <p>21 people we have a list of the ones that we took to the</p>	<p style="text-align: right;">Page 44</p> <p>1 conducted the interviews. Pretty much everyone in their</p> <p>2 interview admitted that they did not complete clinicals.</p> <p>3 So, that's how we started that off, and then we were</p> <p>4 going to work through Etienne's list and then Sanon's</p> <p>5 list the same way, however, an issue came up about the</p> <p>6 privilege to practice. Our team swiftly, within 48</p> <p>7 hours, went through about 3,000 people to get the</p> <p>8 privilege to practice people just from Etienne and Sanon.</p> <p>9 There's a couple of issues that come with this, okay?</p> <p>10 Which I will have to understand is that our team went</p> <p>11 through every state in the country and looked up every</p> <p>12 single state. We have a list of a map on our wall and we</p> <p>13 identify which states we're taking action. The only</p> <p>14 states that are taking public action right now is</p> <p>15 Maryland, we are number one; Florida have charged the</p> <p>16 individuals and offered voluntary surrenders. At the</p> <p>17 last time I checked, only people out of -- I'm sorry,</p> <p>18 Texas -- Texas have charged individuals and offered them</p> <p>19 the voluntary surrenders. Only three people surrendered</p> <p>20 out of Texas. Florida is not taking any action right now</p> <p>21 publicly. This is an issue, and I will explain why. New</p>
<p style="text-align: right;">Page 43</p> <p>1 Board that we originally licensed. So, we have a list of</p> <p>2 pending applicants and a watchlist. What you have to</p> <p>3 remember is that -- can I speak freely about the FBI</p> <p>4 investigation?</p> <p>5 MS. EVANS: Yes.</p> <p>6 MS. TONGUE: So, what you have to remember is</p> <p>7 that the FBI, how they discovered this, they went and did</p> <p>8 a search-and-seizure warrant to Napoleon's address, the</p> <p>9 school, and in this school they found -- well, the school</p> <p>10 is a warehouse, and in the warehouse they found hundreds</p> <p>11 of files, and in the files it contained payments. And</p> <p>12 so, what the FBI has is the list. It doesn't necessarily</p> <p>13 say they actually purchased these transcripts to use</p> <p>14 fraudulently. It really could be, seriously, it could</p> <p>15 just be a piece of paper with a name on it and \$5.00</p> <p>16 written on it, right? And so, they just add that to the</p> <p>17 list. And they are advising each Board to go ahead and</p> <p>18 do their independent investigation from that information.</p> <p>19 So, what we've done, the people that we got in</p> <p>20 last month, we did the questionnaire, a cover letter, and</p> <p>21 also offered the voluntary surrenders, and then we also</p>	<p style="text-align: right;">Page 45</p> <p>1 York has the 900 nurses that they licensed, and they</p> <p>2 notified the NURSUS to ask them politely to turn in their</p> <p>3 licenses. But New York is not a compact state, so this</p> <p>4 nurse can have a New York license in a compact state.</p> <p>5 So, again, that's an issue. Delaware annulled their</p> <p>6 initial licensees, not their endorsement. So, when they</p> <p>7 annulled the initial licensees they removed them directly</p> <p>8 from our NURSUS system, so there's no discipline on file.</p> <p>9 And Iowa, so Iowa has reached out to us to see what we</p> <p>10 were doing with our investigation, and they are mirroring</p> <p>11 it. And so, now they're starting to get people to kind</p> <p>12 of surrender as well.</p> <p>13 The issue that's happened is that when we've</p> <p>14 looked at the privilege to practice from Etienne and from</p> <p>15 Sanon, Virginia is turning their multistate into single</p> <p>16 states. So, we had to remove about 25 to 30 people out</p> <p>17 of that list. Because the licensing states are Florida</p> <p>18 and Texas, this is the states that they look at their</p> <p>19 initial license in, you can't just necessarily skip over</p> <p>20 the people that are single-state because they're due to</p> <p>21 renew. In Florida it's a checkbox and an extra fee that</p>

<p style="text-align: right;">Page 46</p> <p>1 when they renew they can check the: “Yes, I want a 2 compact now,” for an additional amount of money. So, 3 because we wouldn’t bring those people this month, that 4 means we will have to go back again and go back again and 5 go back again to see who has renewed as a multistate. 6 MR. CONTI: That list is constantly changing. 7 MS. TONGUE: Yes. 8 MR. CONTI: Even as other states, hopefully, 9 start to take action and remove the privilege. 10 MS. TONGUE: Right. 11 MR. CONTI: Like, New Jersey just took action 12 against twenty licensees, and I’m assuming — well, they 13 sent them letters of rescission, which also gave them an 14 opportunity to come before the Board. So, it sounds a 15 lot like our summary suspension process. But if they did 16 that, and that’s their home state, New Jersey is a 17 compact state, theoretically, those twenty nurses should 18 come off the list if they took the privilege away. 19 MS. TONGUE: If they didn’t get a license in 20 another compact. 21 MR. CONTI: Right.</p>	<p style="text-align: right;">Page 48</p> <p>1 multi-state it would flag them? 2 MR. CONTI: That’s up to the home state. 3 MS. TONGUE: Yeah, that’s not up to us. 4 MS. EVANS: Sara, we did decide that we want to 5 focus more on our state. 6 MS. TONGUE: All right. 7 MR. CONTI: The licensees. 8 MS. EVANS: Right. 9 MR. CONTI: As the priority. 10 MS. EVANS: As a priority of what you’ve been 11 doing. 12 MS. TONGUE: Okay. 13 MS. EVANS: And we are going to work on the 14 others. 15 MS. ROBIN HILL: Sara, how long does it take to 16 do an investigation, say, somebody’s who’s doing an 17 initializing licensing into Maryland that did one of 18 these schools? 19 MS. TONGUE: So, basically, it really depends 20 on how they respond. So, what happens is, that for these 21 particular schools, when we identify them, we go ahead</p>
<p style="text-align: right;">Page 47</p> <p>1 MS. TONGUE: So, what you have to remember, 2 these people are hopping from compact state to compact 3 state. Many of the individuals that we have are dual 4 licensed in — they start in Florida and then they go to 5 Texas and then they get Iowa, but they also get D.C., a 6 non-compact state. They are learning to jump. 7 So, my thought is that if you do — if you guys 8 vote to do some type of action on a privilege, it’s going 9 to be a constant cycle because we’re getting people that 10 are active the day that present. Let’s say John Doe has 11 a single-state today, so we wouldn’t put him on a list. 12 He renews in July, then he gets a multistate. We have to 13 keep going back. 14 MS. ROBIN HILL: Is there a way of flagging 15 their license? 16 MS. TONGUE: All of them are technically 17 flagged in NURSYS. All of them are flagged, but they can 18 renew. Nothing stops them from renewing. 19 MS. ROBIN HILL: If we notice that they were a 20 single-state, is there a way to flag their name or 21 something so that if they tried to renew as a</p>	<p style="text-align: right;">Page 49</p> <p>1 and send them the questionnaire and the voluntary 2 surrender. We give them a deadline in the questionnaire. 3 Once that deadline hits, then we go ahead and schedule 4 the interview after we receive the questionnaire. 5 So, I would say, if we identify someone today, 6 we will send out the letter today, give them two weeks to 7 respond to the questionnaire. Once that 8 two-week deadline hits, we will send a summons to appear, 9 which gives them another two weeks, and then we conduct 10 the interview if they actually respond to the 11 questionnaire. 12 MS. ROBIN HILL: And if they don’t respond, 13 then? 14 MS. TONGUE: We give them another chance to 15 respond, but we will still go ahead and summons them to 16 appear and try to get the information from the 17 questionnaire during the interview. But the 18 questionnaire is significant for us because it literally 19 — they put it in writing that they have not completed 20 clinical. 21 MR. HICKS: Sara, just a question. Why are we</p>

<p style="text-align: right;">Page 50</p> <p>1 giving them a second chance?</p> <p>2 MS. TONGUE: We haven't given anyone a second</p> <p>3 chance so far. It's just something customary that we</p> <p>4 have done in other investigations.</p> <p>5 MS. ROBIN HILL: Can we get a copy of that</p> <p>6 questionnaire?</p> <p>7 MS. TONGUE: Sure.</p> <p>8 MS. EVANS: Yes.</p> <p>9 MR. HICKS: I don't know that we need to give</p> <p>10 them a second chance.</p> <p>11 MS. TONGUE: Okay.</p> <p>12 MR. HICKS: All it's doing is delaying the</p> <p>13 process.</p> <p>14 MS. TONGUE: That's correct. And so, what</p> <p>15 happens is well is that they get attorneys and then they</p> <p>16 wait until the very end that is almost due for them to</p> <p>17 turn in their questionnaire. If they get an attorney and</p> <p>18 the attorney requests an extension because they just</p> <p>19 retained counsel.</p> <p>20 MR. HICKS: But I think -- and I don't know, I</p> <p>21 might be wrong, but if that is the case and they ask for</p>	<p style="text-align: right;">Page 52</p> <p>1 MR. CONTI: Yeah, these criminal defendants who</p> <p>2 were owners-operators of these programs, in their</p> <p>3 affidavits they did identify a small number of people who</p> <p>4 did legitimately graduate.</p> <p>5 MS. HAYWARD: And those are already out of what</p> <p>6 we will be dealing with?</p> <p>7 MR. CONTI: Yes. I mean, we're not focusing on</p> <p>8 those folks.</p> <p>9 MS. WESTERFIELD: And if they do the</p> <p>10 questionnaire and say they didn't do clinical, we know.</p> <p>11 Maybe once we get started with this maybe they will</p> <p>12 realize that they should just suspend because they've</p> <p>13 seen that we're not allowing people to continue.</p> <p>14 MR. CONTI: Some people like to fight. Now</p> <p>15 there's attorneys advertising all over the nation.</p> <p>16 MS. STEINBERG: I would just like to say, I am</p> <p>17 so impressed with the work that you are doing. It is</p> <p>18 really, really impressive.</p> <p>19 MS. TONGUE: Thank you.</p> <p>20 MR. HICKS: So, Sara, what's your biggest list</p> <p>21 in this that the Board can help you?</p>
<p style="text-align: right;">Page 51</p> <p>1 an extension, just like we do anyone else, that should be</p> <p>2 approved by the president that we grant that request.</p> <p>3 MS. TONGUE: Okay.</p> <p>4 MR. HICKS: Because I can see someone saying,</p> <p>5 'Oh, let me do this and then that will give me more</p> <p>6 time.' Whereas, I don't believe that is something -- they</p> <p>7 should not be waiting until that -- you know, they should</p> <p>8 -- if they got two weeks or whatever and it's Day 12, and</p> <p>9 they're now asking for an extension because they're</p> <p>10 seeking legal counsel, absolutely not.</p> <p>11 MS. TONGUE: Okay.</p> <p>12 MR. HICKS: They should have done that the</p> <p>13 first day they got their letter.</p> <p>14 MS. TONGUE: I agree.</p> <p>15 MR. HICKS: So, I think that we don't grant</p> <p>16 extensions unless approved by the president to do so.</p> <p>17 MS. TONGUE: All right.</p> <p>18 MS. HAYWARD: Did you say that initially that</p> <p>19 with each of these that there are some that are valid and</p> <p>20 then others that aren't? Is there some way that we are</p> <p>21 weeding that out?</p>	<p style="text-align: right;">Page 53</p> <p>1 MS. TONGUE: I am being hit with a lot of --</p> <p>2 there's more than this set that's going on with the</p> <p>3 schools. So, I know of the next set that's coming, and</p> <p>4 that's going to be significant. I am trying to prepare</p> <p>5 now for that hit, but also we are continuing to assist</p> <p>6 with the FBI in current investigations that take</p> <p>7 significant amounts of time.</p> <p>8 For instance, Napoleon B is associated with</p> <p>9 West Palm Beach, right? You're going to hear about four</p> <p>10 cases that we presented last month that we have to take</p> <p>11 back because they were not on the affidavit, but we</p> <p>12 identified them as being a graduate from Med Life. We</p> <p>13 have now learned that Napoleon B is associated with five</p> <p>14 different Med Lifes.</p> <p>15 I spoke with the FBI yesterday and they know</p> <p>16 what my concern is because they've made the connection as</p> <p>17 well. They are advising us to continue with these</p> <p>18 investigations to get these nurses off the street. I</p> <p>19 know very well just from what I hear so far, there are no</p> <p>20 legitimate graduates from any of these programs. And I</p> <p>21 stand firm with that. There is an A List, the FBI pretty</p>

<p style="text-align: right;">Page 54</p> <p>1 much told us to take that with a grain of salt, 2 investigate them as well when you can. 3 MR. CONTI: Just to clarify, they said that 4 when even though Napoleon's B List identifies Med Life 5 West Palm, they're saying they know that it actually 6 applies also to Lauderdale Lakes and Naples? 7 MS. TONGUE: Yes. So, Naples, Lauderdale 8 Lakes, Orlando, and Miramar. 9 MR. CONTI: Are they trying to get her to do 10 the affidavit to include these others? 11 MS. TONGUE: No. They are looking at another 12 indictment. So, it's on paper, there's another owner, 13 but we literally have transcripts from the OAG that I 14 spoke with in Virginia. He sent me something and said, 15 "Hey, Sara, take a look at this." It was a transcript 16 from Lauderdale Lakes, but at the top it says West Palm 17 Beach. And I'm telling you, Dr. Ike has been teaching 18 these classes. And so, the questionnaire two people 19 identified Dr. Ike as being an instructor and they were 20 doing clinicals here up in Hyattsville for Palm Beach 21 School of Nursing. They're all connected.</p>	<p style="text-align: right;">Page 56</p> <p>1 unlike with the affidavit. 2 MS. TONGUE: Right. I'm very concerned about 3 these so-called nurses because in their interviews you 4 will listen to them, and I will give them a clinical 5 question. One person – one of my questions was a very 6 simple dosage calculation, because she said she works in 7 long-term care and she's really good at math. It took 8 her seven minutes. The answer was to give 2.5 mls, she 9 told me 40. 10 One nurse we're bringing back to remove the 11 summary suspension because she wasn't on the B List 12 because she went to Lauderdale Lakes. We did her 13 interview. She did an RN to LPN program, nine days. 14 MS. STEINBERG: An RN to LPN, or LPN to RN? 15 MS. TONGUE: I'm sorry, RN to LPN program, nine 16 days. 17 MS. ROBIN HILL: Nine days? 18 MS. TONGUE: Nine days. 19 MS. WESTERFIELD: Twenty-four hours a day? 20 MS. TONGUE: No, 8:00 to 4:00. And maternity 21 was the hardest class that she had to do from 8:00 to</p>
<p style="text-align: right;">Page 55</p> <p>1 MR. CONTI: And so, the significance of this 2 that the affidavit is something that we can use in our 3 presentations on the summary suspension and the charges, 4 and it's going to go a long way towards establishing 5 substantial evidence. Without that affidavit, now the 6 burden is on Sara to go out and collect the transcript 7 and the interview. That affidavit was so powerful in 8 terms speeding up of this process, and so, that's a 9 problem. 10 MS. TONGUE: So, we have people identified. 11 So, Napoleon's B List is that 4,000 is associated with 12 West Palm Beach. So, that is fine. We're getting a lot 13 of people in that's going to another Med Life, which is 14 Naples, Miramar, Orlando, and Lauderdale Lakes. They 15 discreetly told me there's another indictment coming for 16 one of the other Med Lifes. 17 MR. CONTI: But for those people we need things 18 like the questionnaire and the interview to establish the 19 fact that they didn't graduate, they didn't complete the 20 program either. And taking those things in order to move 21 forward with the summary suspensions and the charges,</p>	<p style="text-align: right;">Page 57</p> <p>1 4:00 because it was all day. No clinical. 2 MR. HICKS: So, Sara, what we're trying to do 3 is help you. That's one of the reasons why we called you 4 in. If we were to establish a subcommittee of the Board, 5 similar to the way we do the CHRC or PRR, could that 6 subgroup perform the interviews and then make the 7 recommendation? 8 MR. CONTI: Then you'd have to disqualify 9 yourself from hearing the case. You can't become a 10 witness. 11 MR. HICKS: But how's that any different than 12 how we do the — 13 MR. CONTI: It's okay for you to ask questions 14 during the hearing, itself. That's separate. When you 15 conduct the investigation yourself, you become the fact 16 finder. 17 MR. HICKS: Well, that's what my thought was 18 that if we had the two people that — 19 MR. CONTI: I mean, other boards do use a sort 20 of liaison model where one of the board members does 21 liaise with the investigator and sort of help the</p>

<p style="text-align: right;">Page 58</p> <p>1 investigator to develop that case. But, yeah, then that</p> <p>2 person testifies in the case.</p> <p>3 MS. TONGUE: But what we're facing right now,</p> <p>4 and just to get what I was saying, is that we're dealing</p> <p>5 with a lot of unsafe people. I don't know what to do</p> <p>6 because I know in my heart we need to go after each and</p> <p>7 every graduate, each and every one. We do not have the</p> <p>8 manpower, and my team was literally ready to walk out the</p> <p>9 door.</p> <p>10 MS. HAYWARD: We don't have your knowledge</p> <p>11 base, but is there something that we can do to relieve</p> <p>12 you of some of this?</p> <p>13 MR. HICKS: That's what we're trying to</p> <p>14 establish. Is there something to relieve your team of</p> <p>15 something that is time consuming that they could be doing</p> <p>16 something else?</p> <p>17 MS. TONGUE: What's helpful is that we don't</p> <p>18 have to do the ROIs. That is extremely helpful for us.</p> <p>19 What I need from you is to tell us, 'Sara, this is what</p> <p>20 we're doing,' and we stick with the plan. Our team will</p> <p>21 do it, but it's the issue that you say one thing -- like,</p>	<p style="text-align: right;">Page 60</p> <p>1 MS. CASSIDY: Makes sense.</p> <p>2 MR. HICKS: And so, and I don't know maybe the</p> <p>3 full details of those situations, but I think I need to</p> <p>4 be consulted if that is the case that before decision is</p> <p>5 made to change the plan that I know what that plan is,</p> <p>6 why we're doing it, how we plan to do it, how we're</p> <p>7 communicating that.</p> <p>8 MS. HAYWARD: And if you ask for it.</p> <p>9 MR. HICKS: Right. I'm with you on that. You</p> <p>10 know, if your team is focused then we need to keep them</p> <p>11 focused and get the work done. But there needs to be a</p> <p>12 significant reason why we would have to change that plan.</p> <p>13 MS. TONGUE: So, we're ready for, if you want</p> <p>14 to, just to focus on the people that we initially</p> <p>15 licensed, and then just send out the questionnaires to</p> <p>16 anybody else that pops up, that's fine. We can just get</p> <p>17 them as they pop up, and focus on the people that gets</p> <p>18 reported to us.</p> <p>19 MS. HAYWARD: Is that what you think is going</p> <p>20 to get people off the streets as soon as possible?</p> <p>21 MS. TONGUE: No.</p>
<p style="text-align: right;">Page 59</p> <p>1 something has been recommended one way, and our team put</p> <p>2 so much time into it to get it done and ready, and then</p> <p>3 it changed. That's not helpful.</p> <p>4 MS. CASSIDY: Did we do that?</p> <p>5 MS. TONGUE: You did not, no. So, I think</p> <p>6 that, just whatever decision you make, let me know what</p> <p>7 it is. If you say, 'Sara, go after everyone.' That's</p> <p>8 all we'll hear, because your team will do it and we will</p> <p>9 get it done. We were prepared to do 200 interviews. We</p> <p>10 were prepared to send out 200 to 600 letters. But when a</p> <p>11 decision is made and then it is backtracked, we lose all</p> <p>12 -- everything. That's how you can help me. Whatever</p> <p>13 decision you make, let me know it's going to be. We're</p> <p>14 ready. We're prepared to do it. But, please, understand</p> <p>15 that no matter how tough a situation is, our team will</p> <p>16 stick through it. We don't backtrack no matter what</p> <p>17 situation we're faced. So, when I tell my team, "Let's</p> <p>18 go and get ready for this war," they are ready. But when</p> <p>19 we're ready for this battle and you say, "You know what?</p> <p>20 I'm concerned about everybody else so battle down. Stand</p> <p>21 down." That's what I have the problem with.</p>	<p style="text-align: right;">Page 61</p> <p>1 MS. HAYWARD: How do you want it to be?</p> <p>2 MS. TONGUE: I cannot say. I really cannot say</p> <p>3 how I -- I know that sitting and waiting until they're</p> <p>4 reported is not going to be the quickest way. However,</p> <p>5 it's not just my decision because there's a lot of</p> <p>6 logistics that go into it, a lot. And I don't want it to</p> <p>7 ever be that we locked into something and we can't finish</p> <p>8 it and we have to remove what we've done. I think that</p> <p>9 looking at the different situations that are popping up,</p> <p>10 if logistically it just can't work for the Board, I</p> <p>11 completely understand that. I understand it, and we can</p> <p>12 work it a different way as they pop up until there's more</p> <p>13 of a clear path to logistics.</p> <p>14 MS. STEINBERG: The key is that we're just</p> <p>15 trying to figure out how to make it a manageable amount,</p> <p>16 most importantly for Maryland, initially, because you</p> <p>17 can't do all of them at the same time.</p> <p>18 So, with those with the licenses in Maryland,</p> <p>19 will you do those with a Maryland address?</p> <p>20 MS. TONGUE: So, I know that there's been some</p> <p>21 more concerns about Siena College than Etienne's Sacred</p>

<p style="text-align: right;">Page 62</p> <p>1 Heart. Sacred Heart is an LPN program. You have to 2 remember that a lot of people are now learning, so they 3 will go from an LPN to an RN program, and then go 4 straight into a nurse practitioner program without 5 completing any clinical or really any course work for an 6 RN.</p> <p>7 MR. HICKS: So, Sara, do you think that the 8 biggest — and I think I heard this, I don't know — the 9 biggest bulk is around the privilege to practice?</p> <p>10 MS. TONGUE: It is.</p> <p>11 MR. HICKS: Okay.</p> <p>12 MS. TONGUE: From Siena, two people are on the 13 list for Maryland that we've licensed via endorsement or 14 initial; Sacred Heart, one, if that. Everyone else is 15 privileged to practice.</p> <p>16 We haven't had a chance to do the MVA search. 17 They jump addresses quite often and they share addresses 18 as well.</p> <p>19 MR. HICKS: But if we were to send them out the 20 survey, we would get that returned that that wasn't their 21 proper address. So, that would hopefully narrow down the</p>	<p style="text-align: right;">Page 64</p> <p>1 all of that only to come up with a stop, right, because 2 you can't find them? If we were able to use 3 the IRS's — I mean, it's something we should — I think 4 we should research and investigate. And I think if they 5 understood the significance of this, I doubt that they 6 would object to it. But worst case scenario, maybe — I 7 don't know — is it legal to summons their —</p> <p>8 MR. CONTI: I don't think we can subpoena the 9 IRS.</p> <p>10 MR. HICKS: I think for you all to do all of 11 this work only to come to a dead end and nothing, 12 whereas, do we really have a resource that we could 13 potentially tap into that would be the source? Maybe 14 it's a login, and maybe they give you a login that you 15 can simply do a search for somebody, find them, and 16 here's the demographic. You don't have to see their tax 17 information, but here's the demographic information that 18 we have, which would be their name, their address, blah, 19 blah, blah. I don't know if something that we can do or 20 not.</p> <p>21 MS. EVANS: I don't know either because we just</p>
<p style="text-align: right;">Page 63</p> <p>1 MVA search type of thing, right?</p> <p>2 MS. TONGUE: Either way, for us to send out the 3 letters we have to do an MVA search for it.</p> <p>4 MR. HICKS: So, is there — I'm just thinking 5 this through a little bit. So, is there a way to not use 6 MVA, but is there a way to incorporate the IRS? Because 7 they have to do taxes, I assume. And so, they would have 8 to give their address on their tax forms. So, do we have 9 the ability to use that versus the MVA, which could be 10 very loose? But where are they filing their taxes? 11 Because that is either; A, they're going to get money; 12 or, B, they're going to have to pay money, but the IRS is 13 going to have a legitimate address going on.</p> <p>14 MS. TONGUE: So, we have access to MVA to run a 15 quick search. We have out login, and we can identify if 16 they have a current address or a driver's license. We do 17 a driver's license run. We have the ability to do the 18 wage and earnings, but the wage and earnings will only 19 produce the last quarter, nothing current, and it will 20 not give us an address.</p> <p>21 MR. HICKS: So, that's my point, right? Why do</p>	<p style="text-align: right;">Page 65</p> <p>1 always deal with the state agencies as far as getting 2 something.</p> <p>3 MR. HICKS: But they have to do their state 4 taxes.</p> <p>5 MS. TONGUE: I'm sorry?</p> <p>6 MS. HAYWARD: Do you have much of an issue with 7 the addresses being current or getting returned?</p> <p>8 MS. CASSIDY: If you file and do direct 9 deposit, you can have any address that you want on that. 10 So, they could be getting a refund and they could put 123 11 Main Street on their address, but they're getting a 12 direct deposit to Bank A.</p> <p>13 MR. CONTI: You're talking about this in 14 connection with sending out the questionnaire and the 15 surrender, right? So, the other legal technicality is 16 that, if we wanted to go after somebody for failure to 17 cooperate because they refuse to send back the 18 questionnaire or sit for an interview, we've got to make 19 sure that we've sent it to all known addresses to make 20 sure that we actually did give them proper notice of the 21 questionnaire. And then, that would be used to prove</p>

<p style="text-align: right;">Page 66</p> <p>1 that they actually didn't cooperate.</p> <p>2 MS. STEINBERG: And their known address is what</p> <p>3 we have on file, right?</p> <p>4 MR. CONTI: Well, it's what we have on file,</p> <p>5 but it's also what they can get through NURSYS. Because</p> <p>6 remember, these are privileged folks, so we don't</p> <p>7 actually have a file here. It's a home state and NURSYS</p> <p>8 probably has, what, four or five or six different</p> <p>9 addresses for them as they move around, and we would be</p> <p>10 obligated to send it to all of them.</p> <p>11 MS. TONGUE: Yeah.</p> <p>12 MR. HICKS: I'm just trying to save you guys</p> <p>13 some time, that's all, by doing all this search to come</p> <p>14 up with a dead end.</p> <p>15 MS. HAYWARD: Or is there something that we</p> <p>16 could do while you're doing something involved? Is there</p> <p>17 something we can do to help you in that process?</p> <p>18 MS. TONGUE: Just really, what the processes</p> <p>19 are, it is what it is, honestly. It's whatever your</p> <p>20 decision is, our team will do it.</p> <p>21 MS. HAYWARD: But we want to get the best</p>	<p style="text-align: right;">Page 68</p> <p>1 is, we can make that decision to the best of our ability</p> <p>2 today, and then next month we hear there's three -- so,</p> <p>3 if we say, right now we want you to focus just on the</p> <p>4 license, and then we can figure out the privileged, and</p> <p>5 then we go to the privileged. If next month we get more</p> <p>6 affidavits, or whatever, and now we have additional</p> <p>7 licenses, we might have to go back to additional</p> <p>8 licensed. Does that mess up your flow?</p> <p>9 MS. TONGUE: No, not at all.</p> <p>10 MS. WESTERFIELD: That's what we're trying to</p> <p>11 figure out.</p> <p>12 MS. EVANS: Consistency is the key.</p> <p>13 Notification and consistency is the key. And so, what I</p> <p>14 want to do is have the Board make the decision on what we</p> <p>15 should focus on so there's not a question as to where the</p> <p>16 team should flow.</p> <p>17 MS. WESTERFIELD: That would be helpful to you.</p> <p>18 If you can go back and say, 'This is the Board has asked</p> <p>19 us to do, so this is what we're going to do.'</p> <p>20 MS. TONGUE: Yes. And then also, I'm always in</p> <p>21 communication with the FBI, they're telling me, 'Hey,</p>
<p style="text-align: right;">Page 67</p> <p>1 results for you.</p> <p>2 MS. WESTERFIELD: We don't want to come back</p> <p>3 next month and find that people have left because we have</p> <p>4 tasked them. Because we have heard that, you know, that</p> <p>5 has been something that there have been people thinking</p> <p>6 about walking out. We don't want to give you a task or</p> <p>7 your team a task and then find out that it was too much</p> <p>8 because we don't know what too much is.</p> <p>9 MS. TONGUE: No, so the issue that has come</p> <p>10 with that is more of when someone gives us a task we do</p> <p>11 it fully. Our issue wasn't because it's too much, it was</p> <p>12 that we did all of this trusting the person that asked us</p> <p>13 to do it, and then the door being slammed in our face.</p> <p>14 So, if you say, 'Sara, this is the plan. This</p> <p>15 is what this is going to be. I want you to send these</p> <p>16 letters to every person.' We will get it done in two</p> <p>17 weeks as long as I know that your decision is what your</p> <p>18 decision is going to be. We will not walk out the door</p> <p>19 because you give us the work, it's because we literally</p> <p>20 trusted a person and we got let down.</p> <p>21 MS. WESTERFIELD: We hear you. What I'm saying</p>	<p style="text-align: right;">Page 69</p> <p>1 Sara, be prepared for this.' We have a heads-up before</p> <p>2 any other state. Heads-up. So, I know when the next one</p> <p>3 is coming and I will let you know as well. I already</p> <p>4 pretty much know what they are focusing on, I just have</p> <p>5 to make sure it's actually concrete, and I will get you</p> <p>6 those numbers. The change of flow does not -- is not at</p> <p>7 all a concern. So, if we focus on this right now and we</p> <p>8 have to change our gears because something else has hit</p> <p>9 us, we're absolutely okay with that.</p> <p>10 MS. EVANS: But just not to change up in the</p> <p>11 process. So, and change up in the process means that</p> <p>12 today we will make it the same on licensure. If Sara</p> <p>13 comes back to us next month and states to us, 'Hey, this</p> <p>14 is what's going on. What would you like to do?' Then</p> <p>15 that's when the decision can be made, and she would know</p> <p>16 how to change the team, but not change anything from this</p> <p>17 Board meeting till the next Board meeting. Does that</p> <p>18 make sense?</p> <p>19 MS. ROBIN HILL: Don't say, 'Focus on licensure</p> <p>20 today,' and tomorrow say, 'Focus on permitting</p> <p>21 privileged.'</p>

<p style="text-align: right;">Page 70</p> <p>1 MS. TONGUE: So, I think without saying too 2 much, someone — it's just the communication that was 3 given me, it was my expectation that this is what you 4 wanted, and then finding out that may have not been the 5 case. Do you see what I'm saying? So, what we've done 6 is, the work that we put in, just knowing it wasn't 7 necessarily what you wanted. 8 MR. HICKS: So, I think we'll fix that. I 9 think that's a communication issue that we will fix so 10 that does not happen. 11 MS. TONGUE: Yes. But I'm absolutely okay if 12 you say, 'Sara, today you're going to focus on this. 13 Tomorrow I want you to focus on this.' I am absolutely 14 okay with that. Absolutely fine. At least I know it 15 comes from you. 16 MS. WESTERFIELD: And please tell you team, and 17 I know we tell you, but we do, we appreciate everything 18 you guys are doing and we hear you. 19 MS. HAYWARD: You want the same things we do. 20 We want them off the street the fastest and the less 21 challenged the better. So, obviously, you're going to</p>	<p style="text-align: right;">Page 72</p> <p>1 Board is in agreement that we will focus on in-state 2 licenses first and process those before — and, did we 3 want to break it down by schools? 4 MS. EVANS: Well, Sara has a whole process. 5 Call it the war room. 6 MR. HICKS: Is it easier, Sara, if we focused 7 on the licensees by school or just all the licensees, 8 period? 9 MS. TONGUE: I think it would be easier if you 10 — to focus on the initial licensees, we have three 11 today. Between Etienne and Sanon, three. If you want us 12 to bring just the licensees that has endorsed or 13 initially licensed to Maryland for summary suspension for 14 immediate action and then work on the backend for the 15 privileged to practice by sending them the 16 questionnaires. And then once we get enough evidence, 17 bring them, we can do it that way as well. That means we 18 will be addressing pretty much everyone until the next 19 list comes out. 20 MR. HICKS: I'm not going to speak on behalf of 21 the Board, but I think that makes the most sense.</p>
<p style="text-align: right;">Page 71</p> <p>1 the nth degree to make sure that we're not going to have 2 the challenge. 3 MR. HICKS: So, yeah, to echo, just let your 4 team know that we're in this just as much as you all are 5 and, you know, our job is to support you and your team 6 whatever way we can. So, if there is something that your 7 team comes up with that they feel we as a Board can help 8 to support by kind of doing a subgroup or whatever those 9 things are to give you a little bit of a release, please, 10 bring that to us so that we can make that happen. 11 MS. TONGUE: Yes. 12 MR. HICKS: We're willing to do that. That's 13 why we called you today to ask you that question, 'What 14 is it that we can do to support your team and 15 understanding all of the things that you have to do?' Not 16 just Operation Nightingale, but all of the other cases 17 that you guys have to deal with on a day-to-day basis. 18 MS. HAYWARD: And that means hands-on, active, 19 assisting, and whatever you delegate. 20 MR. HICKS: I think that we can — and I don't 21 know if we need to vote or not, but I think that the</p>	<p style="text-align: right;">Page 73</p> <p>1 MS. HAYWARD: That's impressive enough that 2 we're getting them off the street. 3 MS. TONGUE: Okay. 4 MS. CASSIDY: And this may change once the FBI 5 issues their next affidavit. 6 MS. TONGUE: This will change. 7 MS. CASSIDY: Okay, thank you. 8 MS. TONGUE: I think we will have a few months. 9 It's not soon. We have a few months. 10 MR. HICKS: So, I think that we will also stop 11 giving the chance. 12 MS. TONGUE: Yes. That's going to be very 13 helpful. I appreciate that. 14 MR. HICKS: They have a date. They have to 15 meet that date just like anyone else would have to do. 16 And any requests for an extension would have to be 17 approved by the President of the Board. 18 MS. TONGUE: Got it. 19 MS. HAYWARD: And, Sara, can feel free to come 20 back to us anytime she wishes. Let us know. 21 MS. EVANS: I will tell you, I have great faith</p>

<p style="text-align: right;">Page 74</p> <p>1 in Sara and I trust her judgment. She has an insight</p> <p>2 that's just remarkable. Because when you hear her put</p> <p>3 things together I just sit back and go, "Wow". But I</p> <p>4 trust what she does, and what even defines it more is the</p> <p>5 trust that the FBI has in Sara. I just can't tell you</p> <p>6 the amount of trust just from the few conversations I've</p> <p>7 had with the FBI, it's tremendous. Well done, is what I</p> <p>8 can say to you, Sara.</p> <p>9 MS. TONGUE: Thank you.</p> <p>10 MR. HICKS: Don't let them trust you to the</p> <p>11 point where they would recruit you.</p> <p>12 (Laughter)</p> <p>13 MR. HICKS: Sara, thank you for coming before</p> <p>14 us today. And, again, let your team know how much we</p> <p>15 appreciate the work that they are doing. Let them know</p> <p>16 the issues that we've identified, we will take care of.</p> <p>17 And then, obviously, what we would like for your team to</p> <p>18 focus.</p> <p>19 MS. TONGUE: Absolutely. We're all thinking</p> <p>20 our shift of a new gear, yes.</p> <p>21 MR. HICKS: Thank you.</p>	<p style="text-align: right;">Page 76</p> <p>1 of those folks on that. Like, they really dug deep.</p> <p>2 They read website, they looked at what our mission was</p> <p>3 and asked questions about that. I was impressed with it,</p> <p>4 but at the same time I was —</p> <p>5 MR. CONTI: Some of it was tangential to the</p> <p>6 actual issues.</p> <p>7 MS. EVANS: Right, it had nothing to do with</p> <p>8 the three we had to respond to. Nothing. Nothing. So,</p> <p>9 when I was getting the questions I was like, "Wait a</p> <p>10 minute, this is not part of the 1, 2, 3."</p> <p>11 MR. HICKS: Right, yeah.</p> <p>12 MS. EVANS: And I must say that Mike and Dr.</p> <p>13 Green did a tremendous job with it. So, I am definitely</p> <p>14 grateful that they were there. I was glad because when I</p> <p>15 couldn't think anymore I had to say, "Dr. Green, what</p> <p>16 would you say?" Or, "Mike, would you like to chime in?"</p> <p>17 Because I was just, like, "They are killing my brain."</p> <p>18 MR. HICKS: Yeah, because I was very happy that</p> <p>19 I didn't have to speak to them. I was, like, it was</p> <p>20 almost like questions you really needed to either know or</p> <p>21 prepare to speak to.</p>
<p style="text-align: right;">Page 75</p> <p>1 (Whereupon, Ms. Tongue was excused from the</p> <p>2 boardroom.)</p> <p>3 MS. EVANS: I haven't had a chance an email,</p> <p>4 but I will speak about it again tomorrow. But, we passed</p> <p>5 our compliance with USDSOE unanimously. We got all the</p> <p>6 votes, that we have twenty more months because that's all</p> <p>7 we have left on this particular renewal. We've already</p> <p>8 submitted our renewal for USDOE.</p> <p>9 MR. HICKS: I have to say, and we can talk more</p> <p>10 about it tomorrow, and I will say the same thing</p> <p>11 tomorrow, but I was really surprised by that hearing.</p> <p>12 MS. EVANS: So, Christine, I had that one</p> <p>13 before the other one, and I was just like, "Oh".</p> <p>14 MR. HICKS: Which one was it that one that I</p> <p>15 attended with the Board, I guess? Was it the Board?</p> <p>16 MS. EVANS: Yeah, NSIQI.</p> <p>17 MR. CONTI: Was that the most recent one?</p> <p>18 MS. EVANS: Yes. It's the one they drilled me</p> <p>19 to death, yes.</p> <p>20 MR. HICKS: The questions they asked, I would</p> <p>21 have — like, they really did their homework, like, some</p>	<p style="text-align: right;">Page 77</p> <p>1 MS. EVANS: And we didn't get that. And they</p> <p>2 took us off the consent agenda.</p> <p>3 MR. HICKS: Yes, that was the first thing that</p> <p>4 happened that I was like, "Oh, shoot, this is not going</p> <p>5 to be good."</p> <p>6 MS. EVANS: To talk to us about our website</p> <p>7 that had nothing to do with 3A, 3D, or 3G, regs.</p> <p>8 MR. HICKS: One person spoke and said, "I would</p> <p>9 like to take this off the consent agenda." I thought,</p> <p>10 "Oh, this is going to be interesting."</p> <p>11 MS. EVANS: But we survived. So, if I can</p> <p>12 survive that and the CNOs meeting, I'm a survivor, and we</p> <p>13 can move forward.</p> <p>14 MR. HICKS: We will talk more about it</p> <p>15 tomorrow.</p> <p>16 MS. EVANS: But I just wanted to let you know,</p> <p>17 and I'm sorry I didn't get the chance to send you an</p> <p>18 email out. It was — when everybody said, "Yes," I was,</p> <p>19 like, "Yes." Because really, our evaluator from USDOE,</p> <p>20 what she brought home is, you're speaking about all these</p> <p>21 other things but had nothing to do with why we felt they</p>

<p style="text-align: right;">Page 78</p> <p>1 were in compliance of everything. So, she had to say 2 that several times. Several, several, several times for 3 them to, like, get it. It's okay, we survived, but I do 4 appreciate everyone's help, Dr. Forbes-Scott's hard work. 5 Because really, Dr. 6 Forbes-Scott, Dr. Green, and Mike did the written piece 7 and made sure everything was there and submitted and 8 transcripts from, you know, our meetings, the Practice 9 and Education as well as our Board meetings. So, they 10 all worked really well together. 11 MS. HAYWARD: Is that why you needed our 12 backgrounds? 13 MS. EVANS: Yes, that's what I needed your 14 resumes for, yes. I just did the little stuff. They 15 did all the hard lifting, not me. 16 MR. HICKS: They didn't ask any questions about 17 anyone's resumes, which would have been nice, but. 18 MS. EVANS: No, they just asked – they did ask 19 why Bonnie was on the team, because she doesn't have her 20 doctorate. Because one of the things I promised the last 21 times that we had everyone with a doctorate on, but I</p>	<p style="text-align: right;">Page 80</p> <p>1 they don't know who's in the building, who can hurt a 2 patient. I get it. I got it. But there's things that I 3 just don't have control over. If I was a CNO, I would 4 want to know as well, but I can't say that no one doesn't 5 need due processes, because I would want due process 6 myself. So, I understand it, and I understand it's 7 frustrating. You know, I've been extremely transparent 8 with the CNOs with everything as far as staffing or what 9 is the process here. I have worked with the deans and 10 directors so that we could do something different for the 11 nursing students to get their CNAs. 12 So, you know, the whole point in all of these 13 conversations is to hear and listen to see how we can 14 work better together, right? If there's something we can 15 do, we do. If it's something I can't, we try to work on 16 the alternative way. Communication is paramount and key 17 for success, especially Susan's communication. I'm 18 sorry, can I just say, Susan did a fantastic job at the 19 hearing last week. Even though it was scarce in numbers, 20 but what they stated was powerful. I was so impressed. 21 I was sitting back there with my chest out to here when</p>
<p style="text-align: right;">Page 79</p> <p>1 told them there's this thing called, you know, people 2 leave and we have to fill. And so, but she's still a 3 nurse, and she's been on orientation for the site visits. 4 So, Dr. Green made sure that was stated. 5 But, you know, I was just happy that it, one, 6 was over; and two, more importantly; we're one of five 7 states of nursing boards that have this distinction. 8 It's going to be truly important right now because I'm 9 getting requests from schools to start new programs, new 10 nursing programs, especially LPN programs. So, we need 11 this so they can have their initial accreditation until 12 they get CCNE or ACEN, depending on what the program is. 13 So, I was happy about that. 14 MS. HAYWARD: Are you with this list that 15 you're making to present when you have your meeting 16 besides hopefully adding all the committees that we all 17 do besides the full-time employees that are missing, that 18 this Board has those distinctions and nobody else does, 19 as they are tearing us apart? 20 MS. EVANS: Yes, and in all honesty, for the 21 chief nursing officers, I understand. I understand that</p>	<p style="text-align: right;">Page 81</p> <p>1 they were speaking, and I was just so proud of you all 2 being Board Members and what you've accomplished. I 3 thank all of you, really, for being Board Members and 4 your support of this Board. I appreciate it. 5 MS. HAYWARD: Two minutes was certainly not 6 enough. 7 MS. EVANS: What did you say? 8 MS. HAYWARD: Two minutes was certainly not 9 enough, whether they even listened or not, but two 10 minutes definitely wasn't enough. 11 MS. EVANS: But I'm telling you, they got it in 12 in two minutes. So, if you have not seen it, please, 13 really watch it is was going on. Susan had the best line 14 after the fact though. But Delegate Kelly was wonderful. 15 MS. STEINBERG: I will tell you off the record. 16 MS. EVANS: Yes. So, that's where we are. Is 17 there anything we can get done? 18 MR. HICKS: Do we have any hearings? 19 MS. EVANS: We have seventeen show cause 20 hearings tomorrow. 21 MR. HICKS: Anything from Counsel?</p>

<p style="text-align: right;">Page 82</p> <p>1 MR. EVANS: We have three cancelled so far.</p> <p>2 MR. HICKS: Counsel.</p> <p>3 MS. EVANS: Oh, counsel.</p> <p>4 MR. CONTI: No.</p> <p>5 MR. HICKS: Okay.</p> <p>6 MS. ROBIN HILL: Gary, can we do other stuff</p> <p>7 besides the show cause today?</p> <p>8 MR. HICKS: Yeah, that's fine. I was just</p> <p>9 thinking about the Board staff that would have to stay</p> <p>10 over. That's my only concern.</p> <p>11 MS. EVANS: We can do some.</p> <p>12 MR. HICKS: Yeah, we can do Jeff, Amber. Well,</p> <p>13 Amber's is usually long.</p> <p>14 MS. WESTERFIELD: Well, if we don't do it today</p> <p>15 then we will have to stay past 8:00 o'clock tomorrow.</p> <p>16 MS. EVANS: So, Sara wanted to present the</p> <p>17 charges on the cases from last month.</p> <p>18 MR. HICKS: That's fine. Get Sara, Jeff, and</p> <p>19 Amber.</p> <p>20 MS. JACKSON: Okay.</p> <p>21 MS. CUMMINGS: Jeff's are going to be in Closed</p>	<p style="text-align: right;">Page 84</p> <p>1 CERTIFICATE OF NOTARY</p> <p>2 I, EDWARD BULLOCK, a Notary Public of the State</p> <p>3 of Maryland, do hereby certify that the proceedings were</p> <p>4 recorded via audio by me and that this transcript is a</p> <p>5 true record of the proceedings. I am not responsible for</p> <p>6 inaudible portions of the proceedings.</p> <p>7 I further certify I am not of counsel to any of</p> <p>8 the parties, nor an employee of counsel, nor related to</p> <p>9 any of the parties, nor in any way interested in the</p> <p>10 outcome of this action as witness my hand and notarial</p> <p>11 seal this 21st day of March, 2023.</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 Edward Bullock, Notary Public</p> <p>18 in and for the State of Maryland</p> <p>19 My commission expires: May 13, 2027</p> <p>20</p> <p>21</p>
<p style="text-align: right;">Page 83</p> <p>1 Session.</p> <p>2 MS. EVANS: Don't get Jeff.</p> <p>3 MR. HICKS: No, don't get Jeff.</p> <p>4 MS. EVANS: Thank you, Katie.</p> <p>5 MR. HICKS: Let's see, yeah, Rosalyn, and if</p> <p>6 Karen Hatwood.</p> <p>7 (Whereupon, at 4:15 p.m. this portion was</p> <p>8 concluded.)</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>	

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MARYLAND BOARD OF NURSING

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ADMINISTRATIVE SESSION

REQUESTS TO CONSIDER

APPLICATION FOR REINSTATEMENT OF

LICENSE/CERTIFICATE

SECTION I

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The Maryland Board of Nursing board meeting was held on Tuesday, March 21, 2023 at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 4:17 p.m., before Edward Bullock, Notary Public in and for the State of Maryland.

REPORTED BY: Edward Bullock, Notary Public

AUDIO RECORDING TRANSCRIBED BY: Edward Bullock, DCR

<div>Page 2</div> <div>1 APPEARANCES:</div> <div>2</div> <div>3 MICHAEL CONTI, Assistant Attorney General</div> <div>4 KATHERINE CUMMINGS, Assistant Attorney General</div> <div>5 Office of the Attorney General</div> <div>6 State of Maryland</div> <div>7 Department of Health & Mental Hygiene</div> <div>8 300 West Preston Street</div> <div>9 Baltimore, Maryland 21201</div> <div>10 410-767-3201</div> <div>11</div> <div>12</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>	<div>Page 4</div> <div>1 ALSO PRESENT:</div> <div>2</div> <div>3 KAREN E.B. EVANS, Executive Director</div> <div>4 RHONDA SCOTT, Deputy Director</div> <div>5 KAREN BROWN, PIA Coordinator</div> <div>6 AMBER HAVENS-BERNAL, Discipline Division</div> <div>7 LAKIA JACKSON, Paralegal</div> <div>8 SARA TONGUE, Director of Enforcement</div> <div>9 KAREN HATWOOD, Compliance Division</div> <div>10 JANET MCINTYRE, Compliance Division</div> <div>11 ROSALYN JOHNSON, Investigations</div> <div>12 SHAWNTA' BATES, Investigations</div> <div>13 VALENCIA JACKSON, Safe Practice</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>
<div>Page 3</div> <div>1 BOARD MEMBER APPEARANCES:</div> <div>2</div> <div>3 GARY HICKS, RN Member, Board President</div> <div>4 ANN TURNER, RN Member, Board Secretary</div> <div>5 M. DAWNE HAYWARD, RN Member</div> <div>6 EMALIE GIBBONS-BAKER, APRN Member</div> <div>7 AUDREY CASSIDY, Consumer Member</div> <div>8 SUSAN STEINBERG, Consumer Member</div> <div>9 SUSAN LYONS, APRN Member (via telephone)</div> <div>10 ROBIN HILL, RN Member, LPN Educator</div> <div>11 HEATHER WESTERFIELD, RN Member</div> <div>12 CHRISTINE LECHLITER, RN Member</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>	<div>Page 5</div> <div>1 PROCEEDINGS</div> <div>2 MR. HICKS: Hi, Karen.</div> <div>3 MS. HATWOOD: Hi. I have I1, Angela Barnes,</div> <div>4 and it's a request for a reinstatement of license.</div> <div>5 The PRR Committee recommendation was to place</div> <div>6 on probation, and that Mike has the checklist of what you</div> <div>7 might want for her. And she was a failure to comply with</div> <div>8 the 7/26/2017 Consent Order of Probation prior.</div> <div>9 MR. HICKS: This is a violation of probation?</div> <div>10 MS. HATWOOD: Mm-hmm. (Affirmative)</div> <div>11 MR. HICKS: We're going to put her back on</div> <div>12 probation?</div> <div>13 MS. HATWOOD: That's what we do here.</div> <div>14 MS. WESTERFIELD: There was a reason. Do you</div> <div>15 remember the reason?</div> <div>16 MS. HATWOOD: No. I remember the one before</div> <div>17 that, that was that she just would not do probation. But</div> <div>18 this particular one --</div> <div>19 MS. WESTERFIELD: It would have been 2017, but</div> <div>20 now she's come back. She did her drug program, she has</div> <div>21 letters of references, she has -- I mean, the question</div>

<p>Page 6</p> <p>1 is, I guess, if they're on probation and they don't make 2 it and then they come back years later, what do you do? 3 Do you not give them a license? 4 MR. HICKS: So, they're on probation, they have 5 gone before Karen's team to explain the probation order 6 and what is required of the probation order. It is then 7 their obligation to fulfill the probation requirements. 8 MS. WESTERFIELD: And she did not? 9 MS. HATFIELD: Right. 10 MR. HICKS: She violated the probationary 11 order. 12 MS. WESTERFIELD: She did? 13 MR. HICKS: Yes. So, historically, my thing 14 is, we go through this process of explaining the 15 probationary order, what is the requirements, Karen's 16 team reaches out to them I'm sure multiple times through 17 the process, "You haven't done this. You haven't done 18 that." They violate the probationary order. By putting 19 them on probation again, why did we put them on probation 20 the first time if they're not going to follow through 21 with the probationary order? It's just like we're</p>	<p>Page 8</p> <p>1 one was that she -- well, she has a long history. 2 MS. HATWOOD: She has been denied reinstatement 3 before. 4 MS. STEINBERG: She had surrendered her 5 license, and now she's asking for reinstatement. She has 6 cleaned up her act, she has gone through treatment, she 7 has all these letters of reference. 8 MS. CONTI: So, I think that's why the 9 committee's recommendation was to consider reinstatement 10 with probation. Not just outright reinstatement, but 11 reinstatement with probation. 12 MS. HATWOOD: Well, the thing is, if you're 13 going to look at her really, we took care of disciplining 14 her for violating that particular probation. We said if 15 she didn't do it, then she violated it. 16 MR. HICKS: So, we will have to go through the 17 probationary orders to see what we would want to do. 18 So, the first question is that we would go 19 ahead and grant the license, the RN license. How long 20 would the probationary order be for? 21 MS. WESTERFIELD: Two years.</p>
<p>Page 7</p> <p>1 rewarding that behavior that you didn't follow the 2 probationary order, which then kind of puts the whole 3 Board -- and this is just my opinion, what's the purpose 4 of doing a probationary order if we're just going to say, 5 "Oh, it's okay. Don't worry about it. Let's just give 6 you another probation."? 7 MS. WESTERFIELD: And I don't disagree. I 8 consider myself extremely strict. The question is: Is 9 there a place and they violate their probation for 10 whatever reason they are not able to do it, x-amount of 11 years later they come back and they say, "I want to be 12 able to be a nurse. I want to be able to do this."? 13 Okay, what do we say, "I'm sorry, you violated your 14 probation five years ago. You'll never get a license in 15 this state again."? 16 MR. HICKS: But there should be a communication 17 with Karen's team to say, "Hey, you know, I'm not going 18 to follow the probationary order." 19 MR. CONTI: Are we on Angela Barnes? 20 MS. CASSIDY: Yes. 21 MR. CONTI: Okay. So, the procedure on this</p>	<p>Page 9</p> <p>1 MS. CASSIDY: Three years. 2 MR. HICKS: Three years? 3 MS. CASSIDY: I said three years, but I'm good 4 with two. 5 MR. HICKS: Okay. So, she only has an RN, 6 right, no advanced practice? 7 MS. HATWOOD: Yes. 8 MR. HICKS: All right. So, she can seek 9 employment as an RN, continue to work -- well, she's not 10 working, right? Hopefully not. 11 MS. HATWOOD: Right. 12 MS. CASSIDY: Hopefully not. 13 MR. HICKS: So, she has to do self-reports. I 14 am just reading down the list so if anyone objects just 15 say you object to it. 16 The Respondent shall immediately notify all 17 employers of her probationary status and arrange for all 18 employers to submit in writing confirmation that they 19 have reviewed the order. Worksite reports, quarterly. 20 The Respondent shall notify the Board in writing of any 21 nursing position to which the Respondent is terminated or</p>

<p style="text-align: right;">Page 10</p> <p>1 voluntarily resigns.</p> <p>2 Any worksite restrictions?</p> <p>3 MS. STEINBERG: Yes.</p> <p>4 MR. HICKS: I will go down that list. The</p> <p>5 emergency room? Yes or no, as a work restriction? Which</p> <p>6 means, she cannot work in those areas.</p> <p>7 MS. WESTERFIELD: This is my question: Based</p> <p>8 off of her history, what is it something that we</p> <p>9 typically do? I mean, hers was alcohol, drug use. So,</p> <p>10 we wouldn't normally allow an emergency room, right?</p> <p>11 MR. HICKS: So, keep in mind, what is their</p> <p>12 access to that source, right? You know, let's mainly it.</p> <p>13 So, operating room? Yes or no? Can work in</p> <p>14 the operating room?</p> <p>15 MS. ROBIN HILL: I would say no.</p> <p>16 MR. HICKS: Yep, I agree. Neonatal intensive</p> <p>17 care?</p> <p>18 ALL: No.</p> <p>19 MR. HICKS: School setting?</p> <p>20 MS. STEINBERG: Yeah.</p> <p>21 MR. HICKS: So, just keep that into perspective</p>	<p style="text-align: right;">Page 12</p> <p>1 worked as a nurse in a safe setting and proven that she</p> <p>2 can pass probation she can go work anywhere, but she has</p> <p>3 to do — she's not done probation once, so we have to do</p> <p>4 something.</p> <p>5 MS. HAYWARD: What I'm saying is that those</p> <p>6 places it's easier to divert than it is others.</p> <p>7 MS. WESTERFIELD: So, where should she work?</p> <p>8 MR. HICKS: Well, we have to go down the list.</p> <p>9 MR. HICKS: Nursing home? She could be the</p> <p>10 only RN.</p> <p>11 MS. HAYWARD: Exactly, that's what I'm saying.</p> <p>12 MS. GIBBONS-BAKER: No.</p> <p>13 MR. HICKS: Palliative care?</p> <p>14 ALL: No.</p> <p>15 MR. HICKS: Temporary agency?</p> <p>16 ALL: No.</p> <p>17 MR. HICKS: Staffing agency?</p> <p>18 ALL: No.</p> <p>19 MR. HICKS: Intensive care unit?</p> <p>20 ALL: No.</p> <p>21 MR. HICKS: Delivery room?</p>
<p style="text-align: right;">Page 11</p> <p>1 the students could be on any drug in which it would be in</p> <p>2 her office and not monitored.</p> <p>3 ALL: No.</p> <p>4 MR. HICKS: Hospice?</p> <p>5 MS. HAYWARD: If you look at her information,</p> <p>6 she's been working in those areas not as a nurse, and</p> <p>7 she's not done anything.</p> <p>8 MS. WESTERFIELD: If we're saying that she</p> <p>9 can't be in an emergency room, I would say hospice. The</p> <p>10 amount of drugs they have available to them is</p> <p>11 tremendous.</p> <p>12 MR. HICKS: Yes. Home healthcare?</p> <p>13 ALL: No.</p> <p>14 MR. HICKS: Critical care unit?</p> <p>15 ALL: No.</p> <p>16 MR. HICKS: Nursing home?</p> <p>17 MS. WESTERFIELD: That's basically, yes, right?</p> <p>18 MR. HICKS: So, she can work in a nursing home.</p> <p>19 MS. WESTERFIELD: This is the thing, we can sit</p> <p>20 here and say every place has drugs. It's about being</p> <p>21 monitored and safety. And after two years, after she has</p>	<p style="text-align: right;">Page 13</p> <p>1 ALL: No.</p> <p>2 MR. HICKS: Psychiatric unit?</p> <p>3 ALL: No.</p> <p>4 MR. HICKS: And assisted living?</p> <p>5 ALL: No.</p> <p>6 MS. STEINBERG: So, where can she work?</p> <p>7 MS. WESTERFIELD: At the hospital.</p> <p>8 MR. HICKS: Dialysis.</p> <p>9 MS. WESTERFIELD: Dialysis and the hospital.</p> <p>10 MR. HICKS: There's opportunity. And she</p> <p>11 could, you know, ask for a site and have the exception</p> <p>12 that she would not administer or have access to</p> <p>13 narcotics, but that would be a written request that she</p> <p>14 would have to provide.</p> <p>15 MS. HATWOOD: Also, she might come to us early</p> <p>16 to ask if she can be at some of these places, and we</p> <p>17 would look at it because we want to know how she would do</p> <p>18 before she got off probation.</p> <p>19 MR. HICKS: All right. So, the Respondent</p> <p>20 shall not work — are we going to limit her shifts? No</p> <p>21 nightshift?</p>

<p style="text-align: right;">Page 14</p> <p>1 MS. HAYWARD: Yes.</p> <p>2 MR. HICKS: Yes? No?</p> <p>3 MS. ROBIN HILL: I say yes.</p> <p>4 MR. HICKS: So, that would be the hours of 7P</p> <p>5 to 7A?</p> <p>6 MS. WESTERFIELD: Or till 11:00.</p> <p>7 MS. HAYWARD: Yes.</p> <p>8 MR. HICKS: And should not more than 40 hours a</p> <p>9 week?</p> <p>10 MS. STEINBERG: Correct.</p> <p>11 MR. HICKS: All right. The Respondent should</p> <p>12 only work there is a registered nurse physically present</p> <p>13 and immediately available?</p> <p>14 ALL: Yes.</p> <p>15 MR. HICKS: No courses? Did she have courses</p> <p>16 before that she had to do?</p> <p>17 MS. HATWOOD: No.</p> <p>18 MR. HICKS: The drug testing, those are</p> <p>19 standard.</p> <p>20 MS. HATWOOD: Forty-five. Twenty-three to</p> <p>21 forty-five or something like that. Yeah, we do it</p>	<p style="text-align: right;">Page 16</p> <p>1 MR. HICKS: The Respondent shall show this</p> <p>2 order to a healthcare provider who prescribes for the</p> <p>3 Respondent including, but not limited to; dentists,</p> <p>4 physicians, pain management clinicians, emergency and</p> <p>5 urgent care providers, nurse practitioner, or a</p> <p>6 physician's assistant.</p> <p>7 If the Respondent is prescribed medication, the</p> <p>8 Respondent shall notify the Board within three days.</p> <p>9 If the Respondent is prescribed a CDS or mood</p> <p>10 altering medication, Respondent shall in addition notify</p> <p>11 the Board in writing and agree to the Board's prescribing</p> <p>12 provider within ten days.</p> <p>13 Treatment: The Respondent shall seek and/or</p> <p>14 remain treatment with a Board-approved treatment provider</p> <p>15 or treatment program within two weeks of the effective</p> <p>16 order.</p> <p>17 Did we request that on the last one?</p> <p>18 MS. HATWOOD: Well, she actually did the Safe</p> <p>19 Practice in Delaware.</p> <p>20 MR. HICKS: Okay.</p> <p>21 MS. HATWOOD: She didn't do it well, so.</p>
<p style="text-align: right;">Page 15</p> <p>1 monthly, and then we add them at-will.</p> <p>2 MR. HICKS: So, no more than 40 per year. The</p> <p>3 Respondent shall not work in a setting or role in which</p> <p>4 the Respondent has access by means automated or key to</p> <p>5 controlled substances. The Respondent shall not work in</p> <p>6 a setting or role in which the Respondent may dispense,</p> <p>7 access, control, or administer CDS.</p> <p>8 No support groups. Did we require her to do</p> <p>9 any in the last order, Karen?</p> <p>10 MS. HATWOOD: What?</p> <p>11 MR. HICKS: Any support groups in the order?</p> <p>12 AA or NA or any of those?</p> <p>13 MS. HATWOOD: I don't think it was an order.</p> <p>14 MS. HAYWARD: She says that she's doing them</p> <p>15 now. "I attend my meetings regularly."</p> <p>16 MR. HICKS: Then that will be up to her when</p> <p>17 she comes back to request to come off of probation that</p> <p>18 she shows evidence of that.</p> <p>19 Respondent shall not take any CDS or mood</p> <p>20 altering drugs?</p> <p>21 ALL: Right.</p>	<p style="text-align: right;">Page 17</p> <p>1 MR. HICKS: She what?</p> <p>2 MS. HATWOOD: She did not do it well.</p> <p>3 MR. HICKS: So, do we want her to seek and</p> <p>4 maintain treatment?</p> <p>5 ALL: Yes.</p> <p>6 MR. HICKS: Respondent shall comply with all</p> <p>7 the terms and conditions set by the treatment program or</p> <p>8 provider. The Respondent shall arrange for the</p> <p>9 Respondent's treatment or provider or treatment program</p> <p>10 to submit quarterly reports. The Respondent shall</p> <p>11 maintain treatment throughout the probationary period</p> <p>12 unless the Respondent is formally discharged and notify</p> <p>13 the Board within two weeks with the discharge summary.</p> <p>14 The Respondent shall sign all necessary consent forms</p> <p>15 requiring authorization to disclose the substance use</p> <p>16 disorder treatment records, including but not limited to;</p> <p>17 the use of the disclosure of the Respondent's substance</p> <p>18 and order, records, or any subsequent Board proceedings,</p> <p>19 including but limited to; any final public order issued</p> <p>20 by the Board.</p> <p>21 Any psychiatric or psychology evaluation?</p>

<p style="text-align: right;">Page 18</p> <p>1 ALL: No.</p> <p>2 MR. HICKS: Travel plan, to standard. And all</p> <p>3 the rest are standard as well.</p> <p>4 MS. HATWOOD: I think she's in Shepard Pratt.</p> <p>5 She's doing Shepard Pratt. Keep in mind, a lot of times</p> <p>6 when you guys talk about the treatment program, a week</p> <p>7 after they're on probation they come off of that,</p> <p>8 whatever treatment or program they're in. So, can you</p> <p>9 say a minimum of what time to be in that treatment</p> <p>10 program? Because she's already done Shepard Pratt in</p> <p>11 January.</p> <p>12 MR. HICKS: Within two weeks of the effective</p> <p>13 order.</p> <p>14 MS. HATWOOD: Right.</p> <p>15 MR. HICKS: The Respondent shall seek and</p> <p>16 maintain treatment with a Board-approved treatment</p> <p>17 provider or treatment program. Within two weeks of the</p> <p>18 effective date of the order the Respondent is responsible</p> <p>19 for ensuring that his or her treatment program or</p> <p>20 treatment provider submits written verification that they</p> <p>21 have reviewed the order by the Board.</p>	<p style="text-align: right;">Page 20</p> <p>1 MR. HICKS: Dr. Robin Hill. All in favor?</p> <p>2 ALL: Aye.</p> <p>3 MR. HICKS: Opposed?</p> <p>4 (No oppositions)</p> <p>5 MR. HICKS: Motion carries.</p> <p>6 MS. HATWOOD: I2 is Karen Plocinik, and the PRR</p> <p>7 Committee recommends to deny because she needs more proof</p> <p>8 that she'll be coming back. I think she had one drug</p> <p>9 screen, maybe, and we always tell them in the letter at</p> <p>10 least six.</p> <p>11 MR. HICKS: How long has she been on probation?</p> <p>12 MS. HATWOOD: She was a participant in the</p> <p>13 Rehab Committee.</p> <p>14 MR. HICKS: So, motion to accept the PRR</p> <p>15 Committee's recommendation to deny?</p> <p>16 MS. ROBIN HILL: So moved.</p> <p>17 MR. HICKS: Dr. Robin Hill.</p> <p>18 MS. GIBBONS-BAKER: Second.</p> <p>19 MR. HICKS: Gibbons-Baker. All in favor?</p> <p>20 ALL: Aye.</p> <p>21 MR. HICKS: Opposed?</p>
<p style="text-align: right;">Page 19</p> <p>1 MR. CONTI: But that doesn't actually give a</p> <p>2 timeframe for actually being in treatment.</p> <p>3 MR. HICKS: I think this is fine, Karen.</p> <p>4 MS. HATWOOD: Okay.</p> <p>5 MR. HICKS: Because I think it's kind of</p> <p>6 implied that you would whatever they determine, that's</p> <p>7 where you would start that program at that particular</p> <p>8 time, but they have to do that within two weeks. So, and</p> <p>9 then they have to notify us of what that plan is going to</p> <p>10 be, and I would assume, when they would start that</p> <p>11 program. So, I think it's kind of in there.</p> <p>12 MS. HATWOOD: Well, Janet was just saying that</p> <p>13 a lot of them won't accept them if they don't have a</p> <p>14 problem.</p> <p>15 MR. HICKS: All right. With that, the motion</p> <p>16 is to reinstate the license with a two-year probation</p> <p>17 with the terms that we have outlined.</p> <p>18 Is there a motion?</p> <p>19 MS. GIBBONS-BAKER: Yes.</p> <p>20 MR. HICKS: Gibbons-Baker.</p> <p>21 MS. ROBIN HILL: Second.</p>	<p style="text-align: right;">Page 21</p> <p>1 (No oppositions)</p> <p>2 MR. HICKS: Motion carries.</p> <p>3 MS. HATWOOD: Thank you.</p> <p>4 (Whereupon, at 4:36 p.m. this portion was</p> <p>5 concluded.)</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>

<p>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21</p>	<p style="text-align: right;">Page 22</p> <p style="text-align: center;">CERTIFICATE OF NOTARY</p> <p>I, EDWARD BULLOCK, a Notary Public of the State of Maryland, do hereby certify that the proceedings were recorded via audio by me and that this transcript is a true record of the proceedings. I am not responsible for inaudible portions of the proceedings.</p> <p>I further certify I am not of counsel to any of the parties, nor an employee of counsel, nor related to any of the parties, nor in any way interested in the outcome of this action as witness my hand and notarial seal this 21st day of March, 2023.</p> <p style="text-align: center;">_____ Edward Bullock, Notary Public in and for the State of Maryland</p> <p>My commission expires: May 13, 2027</p>	

WORD INDEX

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MARYLAND BOARD OF NURSING

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ADMINISTRATIVE SESSION

PROBATION REVIEWS

SECTION O

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The Maryland Board of Nursing board meeting was held on Tuesday, March 21, 2023 at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 4:37 p.m., before Edward Bullock, Notary Public in and for the State of Maryland.

REPORTED BY: Edward Bullock, Notary Public

AUDIO RECORDING TRANSCRIBED BY: Edward Bullock, DCR

<div>Page 2</div> <div>1 APPEARANCES:</div> <div>2</div> <div>3 MICHAEL CONTI, Assistant Attorney General</div> <div>4 KATHERINE CUMMINGS, Assistant Attorney General</div> <div>5 Office of the Attorney General</div> <div>6 State of Maryland</div> <div>7 Department of Health & Mental Hygiene</div> <div>8 300 West Preston Street</div> <div>9 Baltimore, Maryland 21201</div> <div>10 410-767-3201</div> <div>11</div> <div>12</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>	<div>Page 4</div> <div>1 ALSO PRESENT:</div> <div>2</div> <div>3 KAREN E.B. EVANS, Executive Director</div> <div>4 RHONDA SCOTT, Deputy Director</div> <div>5 KAREN BROWN, PIA Coordinator</div> <div>6 AMBER HAVENS-BERNAL, Discipline Division</div> <div>7 LAKIA JACKSON, Paralegal</div> <div>8 SARA TONGUE, Director of Enforcement</div> <div>9 JANET MCINTYRE, Compliance Division</div> <div>10 SHAWNTA' BATES, Compliance Division</div> <div>11 VALENCIA JACKSON, Safe Practice</div> <div>12</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>
<div>Page 3</div> <div>1 BOARD MEMBER APPEARANCES:</div> <div>2</div> <div>3 GARY HICKS, RN Member, Board President</div> <div>4 ANN TURNER, RN Member, Board Secretary</div> <div>5 M. DAWNE HAYWARD, RN Member</div> <div>6 EMALIE GIBBONS-BAKER, APRN Member</div> <div>7 AUDREY CASSIDY, Consumer Member</div> <div>8 SUSAN STEINBERG, Consumer Member</div> <div>9 SUSAN LYONS, APRN Member (via telephone)</div> <div>10 ROBIN HILL, RN Member, LPN Educator</div> <div>11 HEATHER WESTERFIELD, RN Member</div> <div>12 CHRISTINE LECHLITER, RN Member</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div>	<div>Page 5</div> <div>1 PROCEEDINGS</div> <div>2 MS. MCINTYRE: Good afternoon. My first one is</div> <div>3 O1, Sabrina Simpson. Her license number is R207091.</div> <div>4 This is a request for violation of probation,</div> <div>5 and the PRR Committee recommendation was to charge her</div> <div>6 with violation of probation, and the charges will be</div> <div>7 under Section 8-316(a)28 and 30.</div> <div>8 MR. HICKS: Motion to accept the PRR's</div> <div>9 recommendation to charge for violation of probation?</div> <div>10 MS. STEINBERG: Steinberg.</div> <div>11 MR. HICKS: Steinberg.</div> <div>12 MS. CASSIDY: Cassidy.</div> <div>13 MR. HICKS: Cassidy. All in favor?</div> <div>14 ALL: Aye.</div> <div>15 MR. HICKS: Opposed?</div> <div>16 (No oppositions)</div> <div>17 MR. HICKS: Motion carries.</div> <div>18 MS. MCINTYRE: O2, Verna Ruth Gaskins. Her</div> <div>19 license number is R078796, and LP13281. This is a</div> <div>20 request of violation of probation.</div> <div>21 The PRR Committee recommendation was to charge</div>

<p style="text-align: right;">Page 6</p> <p>1 with violation of probation, and the charges would be 2 under 8-316(a)30. 3 MR. HICKS: And that is to charge both the RN 4 and LPN? 5 MS. MCINTYRE: Yes. 6 MR. HICKS: Motion to accept the PRR's 7 recommendation to charge both the RN and LPN for 8 violation of probation? 9 MS. STEINBERG: Steinberg. 10 MR. HICKS: Steinberg. 11 MS. HAYWARD: Second. 12 MR. HICKS: Hayward. All in favor? 13 ALL: Aye. 14 MR. HICKS: Opposed? 15 (No oppositions) 16 MR. HICKS: Motion carries. 17 MS. MCINTYRE: O3, Theodore Ritter. His 18 license number is R057172. This is a request for 19 violation of probation of the RN, and the PRR Committee 20 recommendation was to charge his RN with the violation of 21 probation, and the charges would be under 8-316(a)28 and</p>	<p style="text-align: right;">Page 8</p> <p>1 CERTIFICATE OF NOTARY 2 I, EDWARD BULLOCK, a Notary Public of the State 3 of Maryland, do hereby certify that the proceedings were 4 recorded via audio by me and that this transcript is a 5 true record of the proceedings. I am not responsible for 6 inaudible portions of the proceedings. 7 I further certify I am not of counsel to any of 8 the parties, nor an employee of counsel, nor related to 9 any of the parties, nor in any way interested in the 10 outcome of this action as witness my hand and notarial 11 seal this 21st day of March, 2023. 12 13 14 15 _____ 16 Edward Bullock, Notary Public 17 in and for the State of Maryland 18 19 My commission expires: May 13, 2023 20 21</p>
<p style="text-align: right;">Page 7</p> <p>1 30. 2 MR. HICKS: Motion to accept the committee's 3 recommendation to charge for violation of probation? 4 MS. GIBBONS-BAKER: So moved. 5 MR. HICKS: Gibbons-Baker. 6 MS. TURNER: Turner. 7 MR. HICKS: Turner. All in favor? 8 ALL: Aye. 9 MR. HICKS: Opposed? 10 (No oppositions) 11 MR. HICKS: Motion carries. Thank you. 12 MS. MCINTYRE: Thank you. 13 (Whereupon, at 4:38 p.m. this portion was 14 concluded.) 15 16 17 18 19 20 21</p>	

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MARYLAND BOARD OF NURSING

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ADMINISTRATIVE SESSION

INVESTIGATIVE REPORTS

SECTION D

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The Maryland Board of Nursing board meeting was held on Tuesday, March 21, 2023 at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 4:39 p.m., before Edward Bullock, Notary Public in and for the State of Maryland.

REPORTED BY: Edward Bullock, Notary Public

AUDIO RECORDING TRANSCRIBED BY: Edward Bullock, DCR

<div>Page 2</div> <p>1 APPEARANCES:</p> <p>2</p> <p>3 MICHAEL CONTI, Assistant Attorney General</p> <p>4 KATHERINE CUMMINGS, Assistant Attorney General</p> <p>5 Office of the Attorney General</p> <p>6 State of Maryland</p> <p>7 Department of Health & Mental Hygiene</p> <p>8 300 West Preston Street</p> <p>9 Baltimore, Maryland 21201</p> <p>10 410-767-3201</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>	<div>Page 4</div> <p>1 ALSO PRESENT:</p> <p>2</p> <p>3 KAREN E.B. EVANS, Executive Director</p> <p>4 RHONDA SCOTT, Deputy Director</p> <p>5 KAREN BROWN, PIA Coordinator</p> <p>6 AMBER HAVENS-BERNAL, Discipline Division</p> <p>7 SARA TONGUE, Enforcement Division</p> <p>8 LAKIA JACKSON, Paralegal</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>
<div>Page 3</div> <p>1 BOARD MEMBER APPEARANCES:</p> <p>2</p> <p>3 GARY HICKS, RN Member, Board President</p> <p>4 ANN TURNER, RN Member, Board Secretary</p> <p>5 M. DAWNE HAYWARD, RN Member</p> <p>6 EMALIE GIBBONS-BAKER, APRN Member</p> <p>7 AUDREY CASSIDY, Consumer Member</p> <p>8 SUSAN STEINBERG, Consumer Member</p> <p>9 SUSAN LYONS, APRN Member (via telephone)</p> <p>10 ROBIN HILL, RN Member, LPN Educator</p> <p>11 HEATHER WESTERFIELD, RN Member</p> <p>12 CHRISTINE LECHLITER, RN Member</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>	<div>Page 5</div> <p>1 P R O C E E D I N G S</p> <p>2 MS. TONGUE: Good afternoon, everyone. My name</p> <p>3 is Sara. I am the director of our Enforcement Division.</p> <p>4 I am going to read on Rosalyn's behalf.</p> <p>5 I have Item D. D1 is Avril Watkins, LP40807;</p> <p>6 A00050187, and she has a pending RN Applicant Number</p> <p>7 991013.</p> <p>8 The ROI Review Committee recommended to charge</p> <p>9 the LPN with 8-316(a)8, 25; underlying COMAR</p> <p>10 10.27.19.02(b)1, 30; underlying COMAR</p> <p>11 10.27.10.03(b)2(b)(iii); and then charge the Florida</p> <p>12 multistate privilege to practice, Florida RN9584348 with</p> <p>13 8-316(a)10; underlying 8 and 25; underlying COMAR</p> <p>14 10.27.19.02(b)1, 30; underlying COMAR</p> <p>15 10.27.10.03(b)2(b)(iii); and also charge the CNA with</p> <p>16 8-6(a)10(a)20 and 26. Then also issue an intent to deny</p> <p>17 the RN endorsement application with 8-316(a)30;</p> <p>18 underlying COMAR 10.27.10.03(b)2 and (b)(iii).</p> <p>19 The licensee dispensed incorrect dose of</p> <p>20 methadone. She discovered the medication error shortly</p> <p>21 after dispensing the incorrect dose, and did not report</p>

<p style="text-align: right;">Page 6</p> <p>1 the error. The video recording confirmed that the</p> <p>2 licensee administered the patient doses on November 8,</p> <p>3 2019.</p> <p>4 MR. HICKS: So, we will break this down. So,</p> <p>5 is there a motion to charge the LPN for Avril Watkins</p> <p>6 based on the ROI Committee's review?</p> <p>7 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>8 MR. HICKS: Dr. Robin Hill.</p> <p>9 MS. HAYWARD: Second. Hayward.</p> <p>10 MR. HICKS: Hayward. All in favor?</p> <p>11 ALL: Aye.</p> <p>12 MR. HICKS: Opposed?</p> <p>13 (No oppositions)</p> <p>14 MR. HICKS: Motion carries. Is there a motion</p> <p>15 to charge the Florida multistate license based off the</p> <p>16 ROI's recommendation?</p> <p>17 MS. LECHLITER: Lechlitter.</p> <p>18 MR. HICKS: Lechlitter.</p> <p>19 MS. HAYWARD: Hayward.</p> <p>20 MR. HICKS: Hayward. All in favor?</p> <p>21 ALL: Aye.</p>	<p style="text-align: right;">Page 8</p> <p>1 MR. HICKS: Westerfield. All in favor?</p> <p>2 ALL: Aye.</p> <p>3 MR. HICKS: Opposed?</p> <p>4 (No oppositions)</p> <p>5 MR. HICKS: Motion carries.</p> <p>6 MS. TONGUE: D2, Queendaline Nwobodo, R230325;</p> <p>7 MT0082724; and CNA is A00155068.</p> <p>8 The ROI Review Committee recommended to charge</p> <p>9 the RN with 8-316(a)25; underlying COMAR</p> <p>10 10.27.19.02(c)12; and also charge the CNA and the Med</p> <p>11 Tech with 8-6(a)10(a)26 and 29; underlying COMAR</p> <p>12 10.39.07.02(c)12.</p> <p>13 The licensee was observed physically assaulting</p> <p>14 her mother in the ER. The licensee was charged with</p> <p>15 assault and she entered another plea. The case was</p> <p>16 placed on at set docket.</p> <p>17 MR. HICKS: Is there a motion to charge the RN,</p> <p>18 MT, and CNA based off of the ROI review?</p> <p>19 MS. STEINBERG: What are we charging her with?</p> <p>20 She struck her not during the course of practicing</p> <p>21 nursing. So, what has she been charged with?</p>
<p style="text-align: right;">Page 7</p> <p>1 MR. HICKS: Opposed?</p> <p>2 (No oppositions)</p> <p>3 MR. HICKS: Motion carries. And finally, an</p> <p>4 intent to deny the RN based off of the review by the ROI</p> <p>5 Committee?</p> <p>6 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>7 MR. HICKS: Dr. Robin Hill.</p> <p>8 MS. LECHLITER: Second. Lechlitter.</p> <p>9 MR. HICKS: Lechlitter. All in favor?</p> <p>10 ALL: Aye.</p> <p>11 MR. HICKS: Opposed?</p> <p>12 (No oppositions)</p> <p>13 MR. HICKS: Motion carries.</p> <p>14 MS. JACKSON: You forgot the CNA. You said</p> <p>15 that you were doing them separate.</p> <p>16 MR. HICKS: Oh, I didn't. I'm sorry. And then</p> <p>17 finally, to charge the CNA based off of the ROI Committee</p> <p>18 recommendation?</p> <p>19 MS. LECHLITER: Lechlitter.</p> <p>20 MR. HICKS: Lechlitter.</p> <p>21 MS. WESTERFIELD: Westerfield.</p>	<p style="text-align: right;">Page 9</p> <p>1 MR. CONTI: What are the charges that were</p> <p>2 recommended?</p> <p>3 MS. TONGUE: The 8-316(a)25; and under the</p> <p>4 COMAR 10.27.19.02(c)12.</p> <p>5 MR. CONTI: So, unprofessional or immoral</p> <p>6 conduct.</p> <p>7 MS. STEINBERG: I mean, what she did is wrong.</p> <p>8 I just didn't know if it would come under the Board's</p> <p>9 jurisdiction.</p> <p>10 MR. CONTI: Those are extraordinarily broad</p> <p>11 grounds for violation. I think, arguably, you have</p> <p>12 jurisdiction to do that, it's just whether or not you</p> <p>13 want to do that.</p> <p>14 MR. HICKS: So, is there a motion to accept the</p> <p>15 committee's recommendation to charge all three?</p> <p>16 MS. HAYWARD: If this was anger and she came</p> <p>17 back into the room and she was still hitting her mother,</p> <p>18 I would think she is definitely not safe in the</p> <p>19 community. Would you?</p> <p>20 MR. CONTI: I mean, I think I was recalling the</p> <p>21 discussion that the ROI Review Committee had, it was that</p>

<p style="text-align: right;">Page 10</p> <p>1 if she is willing to do this to her mother in this</p> <p>2 context, is she —</p> <p>3 MS. STEINBERG: I agree there, but then she was</p> <p>4 not found guilty by a court.</p> <p>5 MR. CONTI: There were eyewitnesses at the</p> <p>6 hospital.</p> <p>7 MS. STEINBERG: So, we will have to have all</p> <p>8 those eyewitnesses and everybody?</p> <p>9 MR. CONTI: Right.</p> <p>10 MS. STEINBERG: All right.</p> <p>11 MS. CASSIDY: They investigated, but maybe they</p> <p>12 didn't press any charges?</p> <p>13 MR. CONTI: My recollection is that the</p> <p>14 discussion centered around the fact that there were</p> <p>15 eyewitnesses to this incident.</p> <p>16 MS. CASSIDY: You're right.</p> <p>17 MS. HAYWARD: And she didn't stop hitting her</p> <p>18 in the face when she knew people were watching.</p> <p>19 MR. HICKS: So, I will ask the question again.</p> <p>20 Is there a motion to accept the recommendation by the ROI</p> <p>21 Committee?</p>	<p style="text-align: right;">Page 12</p> <p>1 MR. HICKS: Westerfield.</p> <p>2 MS. STEINBERG: Steinberg.</p> <p>3 MR. HICKS: Steinberg. All in favor?</p> <p>4 ALL: Aye.</p> <p>5 MR. HICKS: Opposed?</p> <p>6 (No oppositions)</p> <p>7 MR. HICKS: Motion carries.</p> <p>8 MS. TONGUE: D4, Anna Egbe, LP53754. The ROI</p> <p>9 Review Committee recommended to issue an intent to</p> <p>10 summarily suspend and charge the LP with 8-316(3);</p> <p>11 underlying COMAR 8-316(a)1, 5(ii), 25; underlying COMAR</p> <p>12 10.27.19.02(b)1 and (c)13; and 8-316(a)28.</p> <p>13 From the Iowa disciplinary action, she provided</p> <p>14 false nurse education credentials on her LPN/RN</p> <p>15 applications. She also misrepresented the education</p> <p>16 credentials on a 2018 employment application. And then,</p> <p>17 on Nevada's disciplinary action, on January 4, 2023</p> <p>18 revocation of her LPN and RN licenses as well she</p> <p>19 provided false nursing education credentials to the</p> <p>20 Nevada Board of Nursing. The LPN school that she</p> <p>21 graduated from was National School of Nursing and Allied</p>
<p style="text-align: right;">Page 11</p> <p>1 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>2 MR. HICKS: So, I heard Robin Hill first. Is</p> <p>3 there a second?</p> <p>4 MS. STEINBERG: I will second it.</p> <p>5 MR. HICKS: Steinberg. All in favor?</p> <p>6 ALL: Aye.</p> <p>7 MR. HICKS: Opposed?</p> <p>8 (No oppositions)</p> <p>9 MR. HICKS: Motion carries. Next?</p> <p>10 MS. TONGUE: D3, Jason Brown, R236397. The ROI</p> <p>11 Review Committee recommended to issue an immediate</p> <p>12 summary suspension and priority charge to the RN with</p> <p>13 8-316(a)21 and 28.</p> <p>14 He was not compliant with the Safe Practice</p> <p>15 Program. He missed 622 call-ins; 47 missed urine drug</p> <p>16 screens; and he did not provide any self-reports or</p> <p>17 worksite reports.</p> <p>18 MR. HICKS: Is there a motion to accept the</p> <p>19 recommendation for immediate summary suspension and to</p> <p>20 priority charge?</p> <p>21 MS. WESTERFIELD: Westerfield.</p>	<p style="text-align: right;">Page 13</p> <p>1 Health, and then the RN school was the Palm Beach School</p> <p>2 of Nursing.</p> <p>3 MR. HICKS: Those were priority charge, right?</p> <p>4 MS. TONGUE: Yes — no, I'm sorry. It did not</p> <p>5 specify, but you can.</p> <p>6 MR. HICKS: So, motion to accept the ROI Review</p> <p>7 Committee's recommendation to issue an intent to</p> <p>8 summarily suspend and to issue a priority charge?</p> <p>9 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>10 MS. HICKS: Dr. Robin Hill.</p> <p>11 MS. HAYWARD: Second. Hayward.</p> <p>12 MR. HICKS: Hayward. All in favor?</p> <p>13 ALL: Aye.</p> <p>14 MR. HICKS: Opposed?</p> <p>15 (No oppositions)</p> <p>16 MR. HICKS: Motion carries.</p> <p>17 MS. TONGUE: D5, Shawna Ellis. She has a</p> <p>18 pending application. I believe it's an RN Applicant</p> <p>19 Number 1002360.</p> <p>20 The ROI Review Committee recommended to take no</p> <p>21 action.</p>

<p style="text-align: right;">Page 14</p> <p>1 MR. HICKS: Motion to accept the committee's</p> <p>2 recommendation to take no action?</p> <p>3 MS. STEINBERG: So moved. Steinberg.</p> <p>4 MR. HICKS: Steinberg.</p> <p>5 MS. LECHLITER: Second. Lechlitter.</p> <p>6 MR. HICKS: Lechlitter. All in favor?</p> <p>7 ALL: Aye.</p> <p>8 MR. HICKS: Opposed?</p> <p>9 (No oppositions)</p> <p>10 MR. HICKS: Motion carries.</p> <p>11 MS. TONGUE: D6 was pulled. D7, Edith Atud,</p> <p>12 R219548.</p> <p>13 The ROI Review Committee recommended to issue</p> <p>14 an intent to summarily suspend and charge the RN with 8-</p> <p>15 316(a)8 and 30; underlying COMAR 10.27.09.03(b)2(b)(iii).</p> <p>16 The Respondent failed to ensure that the</p> <p>17 patient received a treatment and care for CPR by not</p> <p>18 activated 911 in a timely manner. EMS had difficulty</p> <p>19 assessing getting inside the building. EMS saw staff</p> <p>20 performing CPR when they arrived, however the patient was</p> <p>21 found with rigor. The patient was pulseless. All</p>	<p style="text-align: right;">Page 16</p> <p>1 MR. HICKS: Opposed?</p> <p>2 (No oppositions)</p> <p>3 MR. HICKS: Motion carries.</p> <p>4 MS. TONGUE: D9, Afia Yeboah Johnson, LP46171;</p> <p>5 CNA is A00094167.</p> <p>6 The ROI Review Committee recommended to issue</p> <p>7 an intent to summarily suspend and charge the LPN with 8-</p> <p>8 316(a)3; underlying 8-316(a)1, 25; underlying COMAR</p> <p>9 10.27.19.02(b)1(c)13; and 8-316(a)28.</p> <p>10 South Dakota discipline agreed upon disposition</p> <p>11 for denial and waive of hearing; foreign application was</p> <p>12 denied because she was issued an illegitimate diploma and</p> <p>13 transcript from Palm Beach School of Nursing.</p> <p>14 MR. HICKS: Is there a motion to accept the</p> <p>15 committee's recommendation to issue an intent to</p> <p>16 summarily suspend and to priority charge the LPN and the</p> <p>17 CNA?</p> <p>18 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>19 MR. HICKS: Dr. Robin Hill.</p> <p>20 MS. WESTERFIELD: Westerfield.</p> <p>21 MR. HICKS: Westerfield. All in favor?</p>
<p style="text-align: right;">Page 15</p> <p>1 resuscitative efforts ceased.</p> <p>2 MR. HICKS: Is there a motion to accept the</p> <p>3 committee's recommendation for the intent to summarily</p> <p>4 suspend and to charge the RN?</p> <p>5 MS. LECHLITER: So moved. Lechlitter.</p> <p>6 MR. HICKS: Lechlitter.</p> <p>7 MS. ROBIN HILL: Dr. Robin Hill.</p> <p>8 MR. HICKS: Dr. Robin Hill. All in favor?</p> <p>9 ALL: Aye.</p> <p>10 MR. HICKS: Opposed?</p> <p>11 (No oppositions)</p> <p>12 MR. HICKS: Motion carries.</p> <p>13 MS. TONGUE: D8, Lajoy Stokes, A00198507. The</p> <p>14 ROI Review Committee recommended to take no action.</p> <p>15 MR. HICKS: Motion to accept the committee's</p> <p>16 recommendation to take no action.</p> <p>17 MS. STEINBERG: So moved. Steinberg.</p> <p>18 MR. HICKS: Steinberg.</p> <p>19 MS. LECHLITER: Lechlitter.</p> <p>20 MR. HICKS: Lechlitter. All in favor?</p> <p>21 ALL: Aye.</p>	<p style="text-align: right;">Page 17</p> <p>1 ALL: Aye.</p> <p>2 MR. HICKS: Opposed?</p> <p>3 (No oppositions)</p> <p>4 MR. HICKS: Motion carries.</p> <p>5 MS. TONGUE: D10, Daunett Samuda, R110152. She</p> <p>6 is also a CRNP with Family.</p> <p>7 The ROI Review Committee recommended to issue</p> <p>8 to summarily suspend and to charge the RN and CRNP with</p> <p>9 8-316(a)8 and 30; underlying COMAR 10.27.11.03(a)D1</p> <p>10 through 6. She was a delegating nurse for an ALS; no</p> <p>11 waivers or a PCP order for wound care; there were no PCP</p> <p>12 orders for catheter or colostomy; the resident specific</p> <p>13 levels of care was not submitted; there was no evidence</p> <p>14 of the delegating nurse approved staff competencies;</p> <p>15 there was unclear documentation by the delegating nurse</p> <p>16 that involved three residents. The licensees written</p> <p>17 response made several admissions regarding deficiencies.</p> <p>18 MR. HICKS: Is there a motion to accept the ROI</p> <p>19 Committee's to issue an intent to summarily suspend and</p> <p>20 to charge the RN as well as the CRNP?</p> <p>21 MS. LECHLITER: So moved. Lechlitter.</p>

<p style="text-align: right;">Page 18</p> <p>1 MR. HICKS: Lechlitter.</p> <p>2 MS. ROBIN HILL: Second. Dr. Robin Hill.</p> <p>3 MR. HICKS: Dr. Robin Hill. All in favor?</p> <p>4 ALL: Aye.</p> <p>5 MR. HICKS: Opposed?</p> <p>6 (No oppositions)</p> <p>7 MR. HICKS: Motion carries.</p> <p>8 MS. TONGUE: D11 is Abbey Gilhool, R236081.</p> <p>9 The ROI Review Committee recommended to take no action.</p> <p>10 MR. HICKS: Motion to accept the committee's</p> <p>11 recommendation to take no action?</p> <p>12 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>13 MR. HICKS: Dr. Robin Hill.</p> <p>14 MS. HAYWARD: Hayward.</p> <p>15 MR. HICKS: Hayward. All in favor?</p> <p>16 ALL: Aye.</p> <p>17 MR. HICKS: Opposed?</p> <p>18 MS. JACKSON: Hold up. This one, Number 9,</p> <p>19 what were the charges for the CNA again?</p> <p>20 MS. TONGUE: For Afia?</p> <p>21 MS. JACKSON: That's not right because 28 is</p>	<p style="text-align: right;">Page 20</p> <p>1 MR. HICKS: Opposed?</p> <p>2 (No oppositions)</p> <p>3 MR. HICKS: Motion carries. Thank you.</p> <p>4 MS. TONGUE: So, I have additional charges.</p> <p>5 So, the prosecutors provided me with their charges for</p> <p>6 last month's cases in the packet that's been given out to</p> <p>7 you.</p> <p>8 So, I gave you the packet of each prosecutor</p> <p>9 for their cases. I don't know if I needed to read them</p> <p>10 one-by-one, or if we should go page-by-page.</p> <p>11 MR. HICKS: I think what we should do is just</p> <p>12 have you read the name into the record, and then whatever</p> <p>13 the recommendation is by counsel, and then we will vote</p> <p>14 on that.</p> <p>15 MS. TONGUE: Okay. So, the first one I have is</p> <p>16 from Tracy Bull. So, for the Respondent is Ebenezer</p> <p>17 Boahen, R225659. The recommended charges is to charge</p> <p>18 with 8-316(a)1, 2, 20, 25, and 30.</p> <p>19 On March 6, 2023 the Board issued a summary</p> <p>20 suspension on his registered nurse license based on the</p> <p>21 Board's investigation information received from Med Life</p>
<p style="text-align: right;">Page 19</p> <p>1 impersonating somebody. Is that what she did? Her</p> <p>2 certificate expired, right? There should be 26 in there,</p> <p>3 too.</p> <p>4 MS. TONGUE: Denise put to charge the LPN with</p> <p>5 the 28. There's no 26.</p> <p>6 MS. JACKSON: Okay.</p> <p>7 MR. HICKS: So, are you raising the question,</p> <p>8 should we add the charge of 26?</p> <p>9 MS. JACKSON: Yeah, since her certificate has</p> <p>10 expired, right?</p> <p>11 MR. HICKS: Was her certificate expired?</p> <p>12 MS. TONGUE: D9, she has a certificate.</p> <p>13 MR. HICKS: So, the question is, do we want to</p> <p>14 add the charge of 26 since she had an expired</p> <p>15 certificate? So, can we accept the recommendation to add</p> <p>16 26 to the charges?</p> <p>17 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>18 MR. HICKS: Dr. Robin Hill. Is there a second?</p> <p>19 MS. HAYWARD: Hayward.</p> <p>20 MR. HICKS: Hayward. All in favor?</p> <p>21 ALL: Aye.</p>	<p style="text-align: right;">Page 21</p> <p>1 Institute in Palm Beach School of Nursing.</p> <p>2 MR. HICKS: I would add a priority charge.</p> <p>3 MS. TONGUE: Priority, okay.</p> <p>4 MR. HICKS: Is there a motion to accept the</p> <p>5 recommendation with a priority charge?</p> <p>6 MS. CASSIDY: Cassidy.</p> <p>7 MR. HICKS: Cassidy.</p> <p>8 MS. GIBBONS-BAKER: Gibbons-Baker.</p> <p>9 MR. HICKS: Gibbons-Baker. All in favor?</p> <p>10 ALL: Aye.</p> <p>11 MR. HICKS: Opposed?</p> <p>12 (No oppositions)</p> <p>13 MR. HICKS: Motion carries.</p> <p>14 MS. TONGUE: The next one is Cariddad Girlie</p> <p>15 Cerin Bautista. The recommended charges is to charge her</p> <p>16 RN license, which is R246906, with 8-316(a)2, 25, and 30.</p> <p>17 MR. HICKS: I would add priority charge. Is</p> <p>18 there a motion to accept the recommendation and add</p> <p>19 priority charge to it?</p> <p>20 MS. TURNER: So moved. Turner.</p> <p>21 MR. HICKS: Turner.</p>

<p style="text-align: right;">Page 22</p> <p>1 MS. CASSIDY: Cassidy.</p> <p>2 MR. HICKS: Cassidy. All in favor?</p> <p>3 ALL: Aye.</p> <p>4 MR. HICKS: Opposed?</p> <p>5 (No oppositions)</p> <p>6 MR. HICKS: Motion carries.</p> <p>7 MS. TONGUE: The next one I have is also from</p> <p>8 the recommendation from Tracy for Fasilat Coleman. She</p> <p>9 has RN, LPN, and a CNA and med tech. The RN number is</p> <p>10 R240268; LP41527; A00069359; and MT0014892.</p> <p>11 It's recommended to charge her RN license with</p> <p>12 8-316(a)1, 2, 25; underlying COMAR 10.27.19.02(b)1; COMAR</p> <p>13 10.27.19.02(c)12 and 13; and also charge with a 30;</p> <p>14 underlying COMAR 10.27.01.05(a)3(a)and(b). Then also,</p> <p>15 charge the LPN license with 8-316(a)10; underlying COMAR</p> <p>16 8-316(a)1, 2, 25; underlying COMAR 10.27.19.02(b)1; COMAR</p> <p>17 10.27.19.02(c)12 and 13; and also charge with a 30;</p> <p>18 underlying COMAR 10.27.01.10(a)3(a)and(b); and also</p> <p>19 charge with a 28. Then, charge the CNA and med tech</p> <p>20 certificates with</p> <p>21 8-6(a)10(a)20; with underlying charges of 8-316(a)1, 2,</p>	<p style="text-align: right;">Page 24</p> <p>1 MR. HICKS: Gibbons-Baker.</p> <p>2 MS. TURNER: Turner.</p> <p>3 MR. HICKS: Turner. All in favor?</p> <p>4 ALL: Aye.</p> <p>5 MR. HICKS: Opposed?</p> <p>6 (No oppositions)</p> <p>7 MR. HICKS: Motion carries.</p> <p>8 MS. TONGUE: The next one is Glory Anyaebgu,</p> <p>9 R233953. She also is an LP applicant. The</p> <p>10 recommendation is to charge the RN with 8-316(a)1, 25;</p> <p>11 underlying COMAR 10.27.19.02(b)1 and 30; underlying COMAR</p> <p>12 10.27.01.05(a)1(a)2.</p> <p>13 For the LP applicant, she is a graduate from</p> <p>14 the National School of Nursing and Allied Health. It</p> <p>15 could be an issue to attempt to deny based on RN summary</p> <p>16 suspension, and if you do that the charge will be</p> <p>17 8-316(a)10, or we can do an administrative denial.</p> <p>18 MR. HICKS: So, priority charge the RN. Is</p> <p>19 there a motion to accept the recommendation to priority</p> <p>20 charge?</p> <p>21 MS. WESTERFIELD: So moved. Westerfield.</p>
<p style="text-align: right;">Page 23</p> <p>1 25; COMAR 10.27.19.02(b)1; COMAR 10.27.19.02(c)12 and 13;</p> <p>2 30, charged with COMAR 10.27.01.10(a)3(a)and(b); and a</p> <p>3 charge on 26.</p> <p>4 MR. HICKS: I would add a priority charge to</p> <p>5 those. Is there a motion to accept the recommendation</p> <p>6 and add priority charge?</p> <p>7 MS. STEINBERG: So moved. Steinberg.</p> <p>8 MR. HICKS: Steinberg.</p> <p>9 MS. CASSIDY: Cassidy.</p> <p>10 MR. HICKS: Cassidy. All in favor?</p> <p>11 ALL: Aye.</p> <p>12 MR. HICKS: Opposed?</p> <p>13 (No oppositions)</p> <p>14 MR. HICKS: Motion carries.</p> <p>15 MS. TONGUE: The next one I have is Lizabeth</p> <p>16 Coronejo, R23812. The recommended charges is to charge</p> <p>17 the RN with 8-316(a)1, 25; COMAR 10.27.19.02(b)1 and 30;</p> <p>18 underlying COMAR 10.27.01.10(a)3 and 28.</p> <p>19 MR. HICKS: Priority charge. Is there a motion</p> <p>20 to accept the recommendation and add priority charge?</p> <p>21 MS. GIBBONS-BAKER: So moved.</p>	<p style="text-align: right;">Page 25</p> <p>1 MR. HICKS: Westerfield.</p> <p>2 MS. TURNER: Turner.</p> <p>3 MR. HICKS: Turner. All in favor?</p> <p>4 ALL: Aye.</p> <p>5 MR. HICKS: Opposed?</p> <p>6 (No oppositions)</p> <p>7 MR. HICKS: The second is the intent to deny</p> <p>8 the LPN.</p> <p>9 MS. LECHLITER: So moved. Lechlitter.</p> <p>10 MR. HICKS: Lechlitter.</p> <p>11 MS. GIBBONS-BAKER: Gibbons-Baker.</p> <p>12 MR. HICKS: Gibbons-Baker. All in favor?</p> <p>13 ALL: Aye.</p> <p>14 MR. HICKS: Opposed?</p> <p>15 (No oppositions)</p> <p>16 MR. HICKS: Motion carries.</p> <p>17 MS. TONGUE: The next one we have is Nimota</p> <p>18 Adeshina, R226760; LP45937; and A00091045. The</p> <p>19 recommendation is to charge the RN with 8-316(a)1, 25;</p> <p>20 COMAR 10.27.19.02(b)1 and 30; underlying COMAR</p> <p>21 10.27.01.10(a)and 3. Charge the LPN with 8-316(a)10 and</p>

<p style="text-align: right;">Page 26</p> <p>1 28; and then with the CNA charge with 8-6(a)10(a)20 and 2 26. 3 MR. HICKS: Again, I will add a priority to 4 that. Is there a motion to accept the recommendation to 5 priority charge the RN, the LPN, and the CNA? 6 MS. ROBIN HILL: So moved. Dr. Robin Hill. 7 MR. HICKS: Dr. Robin Hill. 8 MS. GIBBONS-BAKER: Gibbons-Baker. 9 MR. HICKS: Gibbons-Baker. All in favor? 10 ALL: Aye. 11 MR. HICKS: Opposed? 12 (No oppositions) 13 MR. HICKS: Motion carries. 14 MS. TONGUE: Next one we have is Desiree 15 Deutchoua, R242756. The recommendation is to charge the 16 RN with 8-316(a)1, 25; underlying COMAR 10.27.19.02(b)1 17 and 30; underlying COMAR 10.27.01.05(a)1 and (a)2. 18 MR. HICKS: Add a priority to that. Is there a 19 motion to accept the recommendation to priority charge 20 the RN? 21 MS. HAYWARD: Hayward.</p>	<p style="text-align: right;">Page 28</p> <p>1 (No oppositions) 2 MR. HICKS: Motion carries. 3 MS. TONGUE: Next one is Modupeola Balogun, 4 R242553; LP44160. The recommendation is to charge the 5 LPN with 8-316(a)1, 2, 25; underlying COMAR 6 10.27.19.02(b)1 and 30; COMAR 10.27.01.05(a)1(a)2; and 7 also charge the LPN with 8-316(a)10 and 28. 8 MR. HICKS: I would add priority charge to 9 that. Is there a motion to accept the recommendation to 10 priority charge? 11 MS. ROBIN HILL: So moved. Dr. Robin Hill. 12 MR. HICKS: Dr. Robin Hill. 13 MS. STEINBERG: Second. Steinberg. 14 MR. HICKS: Steinberg. For the record, 15 that's to priority charge the RN as well as the LPN. 16 MS. TONGUE: Thank you. 17 MR. HICKS: All in favor? 18 ALL: Aye. 19 MR. HICKS: Opposed? 20 (No oppositions) 21 MR. HICKS: Motion carries.</p>
<p style="text-align: right;">Page 27</p> <p>1 MR. HICKS: Hayward. 2 MS. CASSIDY: Cassidy. 3 MR. HICKS: Cassidy. All in favor? 4 ALL: Aye. 5 MR. HICKS: Opposed? 6 (No oppositions) 7 MR. HICKS: Motion carries. 8 MS. TONGUE: The next one is Victoria Agyemang, 9 R255763; LP51863. The recommendation is to charge the RN 10 with 8-316(a)1, 25; underlying COMAR 10.27.19.02(b)1 and 11 30; underlying COMAR 10.27.01.10(a)3(a)and(b). And then, 12 also charge the LPN with 8-316(a)10 and 28. 13 MR. HICKS: Priority charge. So, is there a 14 motion to accept the recommendation to priority charge 15 the RN and LPN? 16 MS. TURNER: So moved. Turner. 17 MR. HICKS: Turner. 18 MS. CASSIDY: Second. Cassidy. 19 MR. HICKS: Cassidy. All in favor? 20 ALL: Aye. 21 MR. HICKS: Opposed?</p>	<p style="text-align: right;">Page 29</p> <p>1 MS. TONGUE: Vivian Numbosi Nwana, these are 2 the requested charges for RN255684, charged with 3 8-316(a)1, 2, 25; COMAR 10.27.19.02(b); COMAR 4 10.27.19.02(c)12, 13; also charged with a 30; COMAR 5 10.27.01.05(a)1 and 2; COMAR 10.27.01.10(a)3(a)(b). Then 6 also, charge the LPN license LP45844 with 7 8-316(a)10 and 28. 8 MR. HICKS: That would be a priority charge. 9 Is there a motion to accept the recommendation to 10 priority charge both the RN and LPN? 11 MS. GIBBONS-BAKER: So moved. 12 MR. HICKS: Gibbons-Baker. 13 MS. ROBIN HILL: Second. Dr. Robin Hill. 14 MR. HICKS: Dr. Robin Hill. All in favor? 15 ALL: Aye. 16 MR. HICKS: Opposed? 17 (No oppositions) 18 MR. HICKS: Motion carries. 19 MS. TONGUE: The next one we have is for Janet 20 Frazier, R2141467; LP48033. The recommendation is to 21 charge the RN license with 8-316(a)1, 2, 25; COMAR</p>

Page 30	Page 32
<p>1 10.27.19.02(b)1; COMAR 10.27.19.02(c)12 and 13; 30, COMAR</p> <p>2 10.27.01.05(a)3(a)and(b). Then also, charge the</p> <p>3 Respondent's LPN license with 8-316(a)10, 1, 2, 25; COMAR</p> <p>4 10.27.19.02(b)1; COMAR 10.27.19.02(c)12 and 13; 30; COMAR</p> <p>5 10.27.01.10(a)3(a)and(b).</p> <p>6 MR. HICKS: That would be a priority charge.</p> <p>7 So, motion to accept the recommendation to priority</p> <p>8 charge both the RN and LPN?</p> <p>9 MS. TURNER: So moved. Turner.</p> <p>10 MR. HICKS: Turner.</p> <p>11 MS. STEINBERG: Steinberg.</p> <p>12 MR. HICKS: Steinberg. All in favor?</p> <p>13 ALL: Aye.</p> <p>14 MR. HICKS: Opposed?</p> <p>15 (No oppositions)</p> <p>16 MR. HICKS: Motion carries.</p> <p>17 MS. TONGUE: Next, I have Kingsley Nwokolo,</p> <p>18 A00153765; MT0100271; and LP53772. The recommendation is</p> <p>19 to charge the CNA and med tech with 8-6(a)10(a)20 and 8-</p> <p>20 316(a)1, 2, 25, 30, and a 26. And then, charge the LPN</p> <p>21 with 8-316(a)1, 2, 25; COMAR 10.27.19.02(b)1; COMAR</p>	<p>1 by the prosecutors so when they do those charges, and</p> <p>2 correct me if I'm wrong, they're the charges that they</p> <p>3 feel they could support that they would have the evidence</p> <p>4 to support.</p> <p>5 MS. ROBIN HILL: So, the COMAR reg could be</p> <p>6 different even though the charge is the same?</p> <p>7 MR. HICKS: That's correct.</p> <p>8 MS. ROBIN HILL: Okay.</p> <p>9 MR. HICKS: Based off of what the prosecutor</p> <p>10 feels that they could successfully prove it.</p> <p>11 MS. CUMMINGS: That's correct</p> <p>12 MS. ROBIN HILL: Okay. I just wanted to</p> <p>13 understand.</p> <p>14 MR. HICKS: Sara?</p> <p>15 MS. TONGUE: Titilayo Ojo, A00027623; LP38693;</p> <p>16 R232420. The recommendation is to charge the CNA/GNA</p> <p>17 with 8-6(a)10(a)20; 8-316(a)1, 2, 25, and 30; then a</p> <p>18 charge of a 26. Charge the LPN with 8-316(a)10; 8-</p> <p>19 316(a)1, 2, 25, and 30; and a 28. And then, charge the</p> <p>20 RN with 8-316(a)1, 2, 25; COMAR 10.27.19.02(b)1; COMAR</p> <p>21 10.27.19.02(c)12 and 13; and then charge with a 30; COMAR</p>
Page 31	Page 33
<p>1 10.27.19.02(c)12, 13, and 30; COMAR 10.27.01.05(a)1, 2.</p> <p>2 MR. HICKS: Priority charge the CNA, MT, and</p> <p>3 LPN.</p> <p>4 MS. LECHLITER: So moved. Lechlitter.</p> <p>5 MR. HICKS: Lechlitter.</p> <p>6 MS. TURNER: Turner.</p> <p>7 MR. HICKS: Turner. All in favor?</p> <p>8 ALL: Aye.</p> <p>9 MR. HICKS: Opposed?</p> <p>10 (No oppositions)</p> <p>11 MR. HICKS: Motion carries.</p> <p>12 MS. ROBIN HILL: May I ask a question?</p> <p>13 MR. HICKS: Yes.</p> <p>14 MS. ROBIN HILL: Shouldn't the charges be the</p> <p>15 same on all of them, like the COMAR reg? So, like, this</p> <p>16 one says: Violates COMAR regulation adopted by the Board</p> <p>17 or an order by the Board, and it's COMAR</p> <p>18 10.27.01.05(a)3(a)and(b). This one says the same thing:</p> <p>19 30, violates regulation adopted by Board. But it's COMAR</p> <p>20 10.27.05.01(a)1 and 2.</p> <p>21 MR. HICKS: Right. So, those are the charges</p>	<p>1 10.27.01.10(a)3(a)(b).</p> <p>2 MR. HICKS: Is there a motion to accept the</p> <p>3 priority charge the CNA/GNA, LPN, and RN?</p> <p>4 MS. GIBBONS-BAKER: So moved.</p> <p>5 MR. HICKS: Gibbons-Baker.</p> <p>6 MS. TURNER: Turner.</p> <p>7 MR. HICKS: Turner. All in favor?</p> <p>8 ALL: Aye.</p> <p>9 MR. HICKS: Opposed?</p> <p>10 (No oppositions)</p> <p>11 MR. HICKS: Motion carries.</p> <p>12 MS. TONGUE: Next is Eunice King, A00003961;</p> <p>13 LP43253; R227347. The recommendation is to charge the</p> <p>14 CNA/GNA with 8-6(a)10(a)20; 8-316(a)1, 2, 25, and 30; and</p> <p>15 26. Charge the LPN with 8-316(a)10; 8-316(a)1, 2, 25,</p> <p>16 and 30; and a 28. Then, charge the RN with</p> <p>17 8-316(a)1, 2, 25; COMAR 10.27.19.02(b)1; COMAR</p> <p>18 10.27.19.02(c)12, 13; and then charge with a 30 as well;</p> <p>19 COMAR 10.27.01.10(a)3(a)(b).</p> <p>20 MR. HICKS: Is there a motion to accept the</p> <p>21 recommendation to priority charge CNA/GNA, LPN, and RN?</p>

	Page 34		Page 36
1	MS. LECHLITER: Lechlitter.	1	stone here, and rescind the previous vote and then vote
2	MR. HICKS: Lechlitter.	2	for this one so that we don't have to bring it back
3	MS. HAYWARD: Hayward.	3	tomorrow.
4	MR. HICKS: Hayward. All in favor?	4	MR. HICKS: So, is there a motion?
5	ALL: Aye.	5	MS. HAYWARD: I make a motion.
6	MR. HICKS: Opposed?	6	MR. HICKS: Hayward.
7	(No oppositions)	7	MS. TURNER: Turner.
8	MR. HICKS: Motion carries.	8	MR. HICKS: Turner. All in favor?
9	MS. TONGUE: The next I have is Ifeyinwa Ikoli,	9	ALL: Aye.
10	R2440100. The recommendation is to charge the RN with 8-	10	MR. HICKS: Opposed?
11	316(a)1, 2, 25; COMAR 10.27.19.02(b)1; COMAR	11	(No oppositions)
12	10.27.19.02(c)12, 13; and to charge with a 30; COMAR	12	MR. HICKS: Motion carries.
13	10.27.01.05(a)1, 2.	13	MS. TONGUE: And then, the very last thing that
14	MR. HICKS: Is there a motion to priority	14	I have for you, this list here I prepared. So, I have
15	charge the RN?	15	three RNs that are on here that are from Maryland. So,
16	MS. STEINBERG: So moved. Steinberg.	16	let's see if we can request a summary suspension on the
17	MR. HICKS: Steinberg.	17	three RNs.
18	MS. LECHLITER: Lechlitter.	18	So, the first one is actually Number One,
19	MR. HICKS: Lechlitter. All in favor?	19	Gladys Aborungong. She has an RN from Maryland. The RN
20	ALL: Aye.	20	is R253349. She is listed on the affidavit from Sanon,
21	MR. HICKS: Opposed?	21	and we did confirm she's a graduate from Siena College.
	Page 35		Page 37
1	(No oppositions)	1	I have the information here if you need to review it.
2	MR. HICKS: Motion carries.	2	MR. CONTI: This would be an immediate summary
3	MS. TONGUE: The next one I have is, I did a	3	suspension, right? This is based on the affidavit, the
4	memo for a request for Marie Tervil. You will receive a	4	criminal indictment, the criminal information. Sanon
5	request back from the prosecutor asking to -- the summary	5	pled guilty, correct? So, there's the guilty plea?
6	suspension was issued last month, but to rescind that	6	MS. TONGUE: Yes.
7	because her name was not on the affidavit of Napoleon B.	7	MR. CONTI: There's the guilty plea with the
8	However, we conducted the interview -- continued to	8	facts supporting the guilty plea. All that information
9	conduct an interview and our investigation, and she was	9	was sent out.
10	interviewed on March 13th, and during the interview she	10	MR. HICKS: So, is there a motion to issue an
11	stated that she was a graduate of Med Life in Lauderdale	11	immediate suspension?
12	Lakes. And she completed an LPN-to-RN program, which was	12	MS. HAYWARD: Hayward.
13	completed in three months. All she had to do was fly	13	MS. TURNER: Turner.
14	down to Florida for three days for three of those months	14	MR. HICKS: Hayward, Turner. All in favor?
15	to go to class from 8:00 to 4:00. And she completed the	15	ALL: Aye.
16	program in nine days over three months, and she did not	16	MR. HICKS: Opposed?
17	complete any clinicals because she's an LPN.	17	(No oppositions)
18	So, if we can actually issue another suspension	18	MR. HICKS: Motion carries.
19	based on this additional information now.	19	MS. TONGUE: The next one is 68. Number 68,
20	MR. HICKS: So, is there a motion to --	20	Celina Labiatu, R257266. We also confirmed that she is a
21	MR. CONTI: We can kill two birds with one	21	graduate of Siena College, and she is also listed on

<p style="text-align: right;">Page 38</p> <p>1 Sanon's affidavit on the B List.</p> <p>2 MR. HICKS: Is there a motion to issue an</p> <p>3 immediate suspension?</p> <p>4 MS. GIBBONS-BAKER: So moved.</p> <p>5 MR. HICKS: Gibbons-Baker.</p> <p>6 MS. ROBIN HILL: Dr. Robin Hill.</p> <p>7 MR. HICKS: Dr. Robin Hill. All in favor?</p> <p>8 ALL: Aye.</p> <p>9 MR. HICKS: Opposed?</p> <p>10 (No Oppositions)</p> <p>11 MR. HICKS: Motion carries.</p> <p>12 MS. TONGUE: The last one is Number 85, Anny</p> <p>13 Ossai, R242910. We confirmed she is a graduate of Siena</p> <p>14 College, and she is listed also on Sanon's affidavit on</p> <p>15 the B List.</p> <p>16 MR. HICKS: Is there a motion to issue an</p> <p>17 immediate suspension?</p> <p>18 MS. HAYWARD: Hayward.</p> <p>19 MR. HICKS: Hayward.</p> <p>20 MS. GIBBONS-BAKER: Gibbons-Baker.</p> <p>21 MR. HICKS: Gibbons-Baker. All in favor?</p>	<p style="text-align: right;">Page 40</p> <p>1 CERTIFICATE OF NOTARY</p> <p>2 I, EDWARD BULLOCK, a Notary Public of the State</p> <p>3 of Maryland, do hereby certify that the proceedings were</p> <p>4 recorded via audio by me and that this transcript is a</p> <p>5 true record of the proceedings. I am not responsible for</p> <p>6 inaudible portions of the proceedings.</p> <p>7 I further certify I am not of counsel to any of</p> <p>8 the parties, nor an employee of counsel, nor related to</p> <p>9 any of the parties, nor in any way interested in the</p> <p>10 outcome of this action as witness my hand and notarial</p> <p>11 seal this 21st day of March, 2023.</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 Edward Bullock, Notary Public</p> <p>18 in and for the State of Maryland</p> <p>19 My commission expires: May 13, 2027</p> <p>20</p> <p>21</p>
<p style="text-align: right;">Page 39</p> <p>1 ALL: Aye.</p> <p>2 MR. HICKS: Opposed?</p> <p>3 (No oppositions)</p> <p>4 MR. HICKS: Motion carries. It goes without</p> <p>5 saying that this list, please, be very careful with it,</p> <p>6 and that it doesn't get lost.</p> <p>7 MS. CASSIDY: Can we leave it here?</p> <p>8 MR. HICKS: Yes.</p> <p>9 MR. HICKS: All right. Thank you, Sara, for</p> <p>10 all of that.</p> <p>11 (Whereupon, at 5:24 p.m. this portion was</p> <p>12 concluded.)</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>	

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MARYLAND BOARD OF NURSING

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ADMINISTRATIVE SESSION

REQUEST FOR ADDITIONAL CHARGES,

AMENDMENT(S) TO CHARGES

OR PRIOR BOARD VOTES

SECTION L

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The Maryland Board of Nursing board meeting was held on Tuesday, March 21, 2023 at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 5:24 p.m., before Edward Bullock, Notary Public in and for the State of Maryland.

REPORTED BY: Edward Bullock, Notary Public

AUDIO RECORDING TRANSCRIBED BY: Edward Bullock, DCR

<div>Page 2</div> <p>1 APPEARANCES:</p> <p>2</p> <p>3 MICHAEL CONTI, Assistant Attorney General</p> <p>4 KATHERINE CUMMINGS, Assistant Attorney General</p> <p>5 Office of the Attorney General</p> <p>6 State of Maryland</p> <p>7 Department of Health & Mental Hygiene</p> <p>8 300 West Preston Street</p> <p>9 Baltimore, Maryland 21201</p> <p>10 410-767-3201</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>	<div>Page 4</div> <p>1 ALSO PRESENT:</p> <p>2</p> <p>3 KAREN E.B. EVANS, Executive Director</p> <p>4 RHONDA SCOTT, Deputy Director</p> <p>5 KAREN BROWN, PIA Coordinator</p> <p>6 AMBER HAVENS-BERNAL, Discipline Division</p> <p>7 SARA TONGUE, Enforcement Division</p> <p>8 LAKIA JACKSON, Paralegal</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>
<div>Page 3</div> <p>1 BOARD MEMBER APPEARANCES:</p> <p>2</p> <p>3 GARY HICKS, RN Member, Board President</p> <p>4 ANN TURNER, RN Member, Board Secretary</p> <p>5 M. DAWNE HAYWARD, RN Member</p> <p>6 EMALIE GIBBONS-BAKER, APRN Member</p> <p>7 AUDREY CASSIDY, Consumer Member</p> <p>8 SUSAN STEINBERG, Consumer Member</p> <p>9 SUSAN LYONS, APRN Member (via telephone)</p> <p>10 ROBIN HILL, RN Member, LPN Educator</p> <p>11 HEATHER WESTERFIELD, RN Member</p> <p>12 CHRISTINE LECHLITER, RN Member</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p>	<div>Page 5</div> <p>1 PROCEEDINGS</p> <p>2 MR. CONTI: We can do L now. Marie Tervil was</p> <p>3 the one where you just voted to rescind the previous vote</p> <p>4 to summarily suspend on the previous basis and change it</p> <p>5 to vote to summarily suspend on the basis that was read.</p> <p>6 So, that was taken care of.</p> <p>7 MS. HAVENS-BERNAL: L1 is pulled. That's one</p> <p>8 of the ones you all just did.</p> <p>9 L2 is Queenta Banack, R235789. At the February</p> <p>10 22, 2023 Board meeting you voted to issue an immediate</p> <p>11 summary suspension of Respondent's RN license, but</p> <p>12 determined that she was not one of those nurses. So, at</p> <p>13 this time, there is insufficient evidence to proceed with</p> <p>14 the prosecution. They will continue with interviews in</p> <p>15 looking at it more closely. So, she may come back, but</p> <p>16 right now the Board -- what the prosecutor is requesting</p> <p>17 to rescind the vote of summary suspension.</p> <p>18 MR. HICKS: Is there a motion to rescind the</p> <p>19 vote for immediate summary suspension?</p> <p>20 MS. LECHLITER: Lechlitter.</p> <p>21 MR. HICKS: Lechlitter.</p>

<p style="text-align: right;">Page 6</p> <p>1 MS. HAYWARD: Hayward.</p> <p>2 MR. HICKS: Hayward. All in favor?</p> <p>3 ALL: Aye.</p> <p>4 MR. HICKS: Opposed?</p> <p>5 (No oppositions)</p> <p>6 MR. HICKS: Motion carries.</p> <p>7 MS. HAVENS-BERNAL: L3 is Carol Amanda Jeffers,</p> <p>8 R239709. At the February 22, 2023 Board meeting the</p> <p>9 Board voted to an immediate summary suspension of the</p> <p>10 Respondent's RN license. When the prosecutor received</p> <p>11 the case file they determined that she was not one of</p> <p>12 those names on the list. So, at this time, there is</p> <p>13 insufficient evidence to proceed with the prosecution,</p> <p>14 and they asked to rescind the vote to summarily suspend</p> <p>15 the RN to a return to investigation.</p> <p>16 MR. HICKS: Is there a motion to rescind the</p> <p>17 vote to issue an immediate summary suspension?</p> <p>18 MS. GIBBONS-BAKER: Gibbons-Baker.</p> <p>19 MR. HICKS: Gibbons-Baker.</p> <p>20 MS. TURNER: Turner.</p> <p>21 MR. HICKS: Turner. All in favor?</p>	<p style="text-align: right;">Page 8</p> <p>1 MR. HICKS: Motion carries. Thank you, Amber.</p> <p>2 MS. HAVENS-BERNAL: Thank you.</p> <p>3 MR. HICKS: Is there a motion to go out of</p> <p>4 Administrative Session?</p> <p>5 MS. HAYWARD: So moved. Hayward.</p> <p>6 MR. HICKS: Hayward. Is there a second?</p> <p>7 MS. CASSIDY: Cassidy.</p> <p>8 MR. HICKS: Cassidy. All in favor?</p> <p>9 ALL: Aye.</p> <p>10 MR. HICKS: Opposed?</p> <p>11 (No oppositions)</p> <p>12 MR. HICKS: Motion carries.</p> <p>13 (Whereupon, at 5:28 p.m. the Administrative</p> <p>14 Session was adjourned.)</p>
<p style="text-align: right;">Page 7</p> <p>1 ALL: Aye.</p> <p>2 MR. HICKS: Opposed?</p> <p>3 (No oppositions)</p> <p>4 MR. HICKS: Motion carries.</p> <p>5 MS. HAVENS-BERNAL: L4 is Stephanie Johnson,</p> <p>6 R237353. At the February 22, 2023 the Board voted to</p> <p>7 issue an immediate summary suspension of the Respondent's</p> <p>8 RN license. When the prosecutor received the file they</p> <p>9 determined that she was not on the list, and are asking</p> <p>10 to rescind the vote for summary suspension based on that</p> <p>11 vote. There was insufficient evidence to proceed with</p> <p>12 prosecution, and she was returned to investigations.</p> <p>13 MR. HICKS: Motion to rescind the summary</p> <p>14 suspension?</p> <p>15 MS. HAYWARD: So moved. Hayward.</p> <p>16 MR. HICKS: Hayward.</p> <p>17 MS. TURNER: Turner.</p> <p>18 MR. HICKS: Turner. All in favor?</p> <p>19 ALL: Aye.</p> <p>20 MR. HICKS: Opposed?</p> <p>21 (No oppositions)</p>	<p style="text-align: right;">Page 9</p> <p>1 CERTIFICATE OF NOTARY</p> <p>2 I, EDWARD BULLOCK, a Notary Public of the State</p> <p>3 of Maryland, do hereby certify that the proceedings were</p> <p>4 recorded via audio by me and that this transcript is a</p> <p>5 true record of the proceedings. I am not responsible for</p> <p>6 inaudible portions of the proceedings.</p> <p>7 I further certify I am not of counsel to any of</p> <p>8 the parties, nor an employee of counsel, nor related to</p> <p>9 any of the parties, nor in any way interested in the</p> <p>10 outcome of this action as witness my hand and notarial</p> <p>11 seal this 21st day of March, 2023.</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 Edward Bullock, Notary Public</p> <p>18 in and for the State of Maryland</p> <p>19 My commission expires: May 13, 2027</p> <p>20</p> <p>21</p>

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Script for Closing Open Session

In a moment, I am going to ask if there is a motion to close the open session, but first I am going to walk us through the written statement that is required by the Open Meetings Act to ensure that all Board members agree with its contents.

As documented in the written statement, the statutory authority to close this open session and meet in closed session is General Provisions § 3-305(b)(13), which gives the Board the authority to close an open session "to comply with a specific constitutional, statutory, or judicially imposed requirement that prevents public disclosures about a particular matter or proceeding." The topic to be discussed during closed session is applications for licensure and/or certification. The reason for discussing this topic in closed session is to discuss confidential matters that are prohibited from public disclosure by the Annotated Code of Maryland, Health Occupations Article § 8-303(f), Health Occupations Article § 8-320(a), Health Occupations Article § 1-401 *et seq.*, and General Provisions Article § 4-333. In addition, the Board may also perform quasi-judicial and administrative functions involving disciplinary matters during the closed session.

Is there a motion to close this open session pursuant to the statutory authority and reasons cited in the written statement or any discussion thereof?

MARYLAND STATE BOARD OF NURSING

Presiding Officer's Written Statement for Closing a Meeting
under the Open Meetings Act (Md. Code Ann., Gen. Prov. § 3-305)

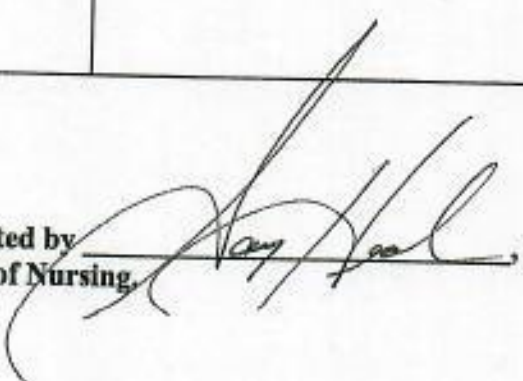
1. Recorded vote to close the meeting: Date: 3/22/23 Time: 9:40 am
Location: Maryland Board of Nursing, 4140 Patterson Avenue, Baltimore, MD
Motion to close meeting made by: Steinberg Seconded by Cassidy
Members in favor: Lyons, Lichter, Gibbons-Baker, Turner, Hayward, Hicks
Opposed: None Abstaining: None
Absent: Vickers, Dworshak, J. Hill
2. Statutory authority to close session. This meeting will be closed under Md. Code Ann., Gen. Prov. § 3-305(b) only:

(1)___ "To discuss the appointment, employment, assignment, promotion, discipline, demotion, compensation, removal, resignation, or performance evaluation of appointees, employees, or officials over whom this public body has jurisdiction; any other personnel matter that affects one or more specific individuals"; (2)___ "To protect the privacy or reputation of individuals concerning a matter not related to public business"; (3)___ "To consider the acquisition of real property for a public purpose and matters directly related thereto"; (4)___ "To consider a matter that concerns the proposal for a business or industrial organization to locate, expand, or remain in the State"; (5)___ "To consider the investment of public funds"; (6)___ "To consider the marketing of public securities"; (7)___ "To consult with counsel to obtain legal advice"; (8) X "To consult with staff, consultants, or other individuals about pending or potential litigation"; (9)___ "To conduct collective bargaining negotiations or consider matters that relate to the negotiations"; (10)___ "To discuss public security, if the public body determines that public discussion would constitute a risk to the public or to public security, including: (i) the deployment of fire and police services and staff; and (ii) the development and implementation of emergency plans"; (11)___ "To prepare, administer, or grade a scholastic, licensing, or qualifying examination"; (12)___ "To conduct or discuss an investigative proceeding on actual or possible criminal conduct"; (13) X "To comply with a specific constitutional, statutory, or judicially imposed requirement that prevents public disclosures about a particular proceeding or matter"; (14)___ "Before a contract is awarded or bids are opened, to discuss a matter directly related to a negotiating strategy or the contents of a bid or proposal, if public discussion or disclosure would adversely impact the ability of the public body to participate in the competitive bidding or proposal process." (15)___ "To discuss cybersecurity, if the public body determines that public discussion would constitute a risk to: (i) security assessments or deployments relating to information resources technology; (ii) network security information . . . or (iii) deployments or implementation of security personnel, critical infrastructure, or security devices."

Cassidy
Steinberg
R. Hill
Westerfield

3. For each provision checked above, disclosure of the topic to be discussed and the Maryland State Board of Nursing's reason for discussing that topic in closed session.

Citation	Topic	Reason for closed-session discussion of topic
§ 3-305(b) (13)	Applications for licensure and/or certification	To discuss confidential matters prohibited from public disclosure by Md. Code Ann., Health Occ. sections 8-303(f), 8-320(a), 1-401 <i>et seq.</i> and General Provisions section 4-333.
§ 3-305(b) (8)	Pending litigation w/ MDH Medicaid Unit	To discuss legal issues and strategy relating to pending litigation involving the MDH Medicaid Unit
§ 3-305(b) ()		

4. This statement is made or adopted by , Presiding Officer, Maryland State Board of Nursing.